

Contract Year Ending 2022 Capitation Rate Notification - Access to Professional Services Initiative Arizona Long Term Care System - Elderly and Physical Disability Program

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Prepared for:
The Centers for Medicare & Medicaid Services

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CYE 22 Capitation Rate Notification — APSI, ALTCS-EPD Program

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Introduction and Limitations

The purpose of this capitation rate notification document is to provide documentation of the data, assumptions, and methodologies used to allocate a delivery system and provider payments initiative (i.e., state directed payment), the Arizona Health Care Cost Containment System (AHCCCS) Access to Professional Services Initiative (APSI), across the Contract Year Ending 2022 (CYE 22, October 1, 2021 through September 30, 2022) capitation rates for the Arizona Long Term Care System (ALTCS) Elderly and Physical Disability (ALTCS-EPD) Program.

The APSI payments are payments under 42 CFR § 438.6(c)(1)(iii)(B), as codified in the 2016 Medicaid and Children's Health Insurance Program (CHIP) Managed Care Final Rule. This capitation rate notification document was prepared for Centers for Medicare & Medicaid Services (CMS), or its actuaries, for review of the APSI payments allocation methodology. This capitation rate notification document also provides the CYE 22 ALTCS-EPD Program capitation rates with and without the APSI payments for CMS review. This capitation rate notification document may not be appropriate for any other purpose.

This capitation rate notification document may also be made available publicly on the AHCCCS website or distributed to other parties. If this capitation rate notification document is made available to third parties, then this capitation rate notification document and the original rate certification along with any amendments should be provided in their entirety. Any third party reviewing this capitation rate notification document and capitation rate certifications should be familiar with the AHCCCS Medicaid managed care program, the provisions of 42 CFR Part 438 applicable to this rate certification, the 2021-2022 Medicaid Managed Care Rate Development Guide (2022 Guide), Actuarial Standards of Practice and generally accepted actuarial principles and practices.

CMS has yet to release a rate development guide for capitation rate updates related to payments under 42 CFR § 438.6(c). In lieu of having an official guide to follow, AHCCCS will follow the 2022 Guide for organizing this capitation rate notification document. The 2022 Guide describes the rate development standards and appropriate documentation to be included within Medicaid managed care rate certifications. In particular, Section I.4.D. covers state directed payments and it is this section that will contain the capitation rate notification documentation. Sections of the 2022 Guide that do not apply will be marked as "Not Applicable" and will be included in this rate notification document for completeness.



Section I Medicaid Managed Care Rates

I.1. General Information

Not applicable to the APSI for the CYE 22 ALTCS-EPD Program rate update.

I.2. Data

Not applicable to the APSI for the CYE 22 ALTCS-EPD Program rate update.

I.3. Projected Benefit Costs and Trends

Not applicable to the APSI for the CYE 22 ALTCS-EPD Program rate update.

I.4. Special Contract Provisions Related to Payment

I.4.A. Incentive Arrangements

Not applicable to the APSI for the CYE 22 ALTCS-EPD Program rate update.

I.4.B. Withhold Arrangements

Not applicable to the APSI for the CYE 22 ALTCS-EPD Program rate update.

I.4.C. Risk-Sharing Mechanisms

Not applicable to the APSI for the CYE 22 ALTCS-EPD Program rate update.

I.4.D. State Directed Payments

I.4.D.i. Rate Development Standards

This section of the 2022 Guide provides information on delivery system and provider payment initiatives authorized under 42 CFR § 438.6(c).

I.4.D.ii. Appropriate Documentation

The following sections of the 2022 Guide, Section I.4.D.ii.(a)(i) through Section I.4.D.ii.(a)(iii), were provided in the CYE 22 ALTCS-EPD Program Capitation Rate Certification as signed by Wenzhang Du and Colby Schaeffer on August 13, 2021. These sections are being provided again to facilitate CMS' review, updated as necessary to provide additional information. There were two amendments to the CYE 22 rate certification which did not impact APSI. The first amendment was signed on February 14, 2022, relating to costs associated with CMS' approval of AHCCCS' spending plan for Home and Community Based Services (HCBS) initiatives authorized and funded under section 9817 of the American Rescue Plan Act (ARPA). The second amendment was signed on January 6, 2023, relating to costs associated with the ARPA HCBS Behavioral Health Outpatient directed payment and a revision in the amount for a different directed payment related to nursing facilities.

I.4.D.ii.(a) Description of State Directed Payments

I.4.D.ii.(a)(i) Type and Description of Directed Payment Arrangements

The APSI seeks to provide enhanced support to certain professionals in order to (1) preserve and enhance access to these professionals who deliver essential services to Medicaid recipients in Arizona



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and (2) support professionals who are critical to professional training and education efforts. The APSI is a program to preserve and promote access to medical services through a uniform percentage increase to the Contractors' rates for professional services provided by qualified physicians and non-physician professionals affiliated with designated hospitals who meet the following definition:

- A hospital facility with an ACGME-accredited teaching program and which is operated pursuant to the authority in Arizona Statute Title 48, Chapter 31; or,
- A hospital facility with:
 - o An ACGME-accredited teaching program with a state university, and
 - AHCCCS inpatient discharge utilization volume greater than or equal to 30 percent as calculated by the Arizona Department of Health Services for calendar year 2014; or,
- A freestanding children's hospital or a pediatric unit of a general acute care hospital with greater than one hundred (100) licensed pediatric beds, excluding nursery beds.

The APSI provides a uniform percentage increase of 59% to otherwise contracted rates for qualified practitioners for all claims for which AHCCCS is the primary payer. The rate increase is intended to supplement, not supplant, payments to eligible providers. The uniform percentage increase of 59% was reduced from the 62% increase documented in the original capitation rate certification signed on August 11, 2021, based on CMS' recent approval of an amendment to the APSI preprint (AZ_Fee_AMC_Amend_20211001-20220930, approved by CMS September 15, 2023) to ensure the total payments to the eligible providers would not exceed 100% of average commercial rates.

I.4.D.ii.(a)(ii) Directed Payments Incorporated in Capitation Rates

Not applicable to the APSI for the CYE 22 ALTCS-EPD Program rate update.

I.4.D.ii.(a)(iii) Directed Payments Under Separate Payment Arrangement

The APSI was not included in the ALTCS-EPD certified capitation rates and has been paid out via lump sum payments.

I.4.D.ii.(a)(iii)(A) Aggregate Amount

The original estimates of anticipated payments, including premium tax, for APSI were approximately \$3.5 million. AHCCCS distributed the total payment via four quarterly lump sum payments each equal to 20% of the estimated amount to the Contractors, and a final lump sum payment after the completion of the contract year which equaled the difference between the quarterly payments and the actual annual rate increase calculated based on encounter data for the contract year. The total payments paid through the ALTCS-EPD Contractors for the APSI were \$3.2 million, inclusive of premium tax.

I.4.D.ii.(a)(iii)(B) Actuarial Certification of the Amount of the Separate Payment Term

The actuaries certified to the aggregate directed payment estimates as actuarially sound according to 42 CFR § 438.4 in the original rate certification. The original estimates were based on projections of future events. This notification document incorporates the actual final aggregate payments by rate cell and the AHCCCS actuaries certify the final payment amounts by rate cell as actuarially sound according to 42 CFR § 438.4.



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I.4.D.ii.(a)(iii)(C) Estimated Impact by Rate Cell

Appendix 1 shows the total APSI dollars paid, including premium tax, by rate cell. Appendix 2 shows the APSI payments by rate cell as if they had been incorporated into the capitation rates as PMPMs. Totals may not add up due to rounding.

I.4.D.ii.(a)(iii)(D) Preprint Acknowledgement

These payments were made under the APSI 42 CFR § 438.6(c) payment arrangement in a manner consistent with the preprints approved by CMS (inclusive of any/all correspondence between the state and CMS regarding the preprint).

I.4.D.ii.(a)(iii)(E) Future Documentation Requirements

AHCCCS is submitting this notification document to CMS which incorporates the total amount of the APSI payments into the rate certification's rate cells, consistent with the distribution methodology described in the preprint approved by CMS. The capitation rates with and without the APSI payments can be found in Appendix 2.

I.4.E. Pass-Through Payments

Not applicable to the APSI for the CYE 22 ALTCS-EPD Program rate update.

I.5. Projected Non-Benefit Costs

Not applicable to the APSI for the CYE 22 ALTCS-EPD Program rate update.

I.6. Risk Adjustment and Acuity Adjustments

Not applicable to the APSI for the CYE 22 ALTCS-EPD Program rate update.

Section II Medicaid Managed Care Rates with Long-Term Services and Supports

Not applicable to the APSI for the CYE 22 ALTCS-EPD Program rate update.

Section III New Adult Group Capitation Rates

Not applicable to the APSI for the CYE 22 ALTCS-EPD Program rate update.



Appendix 1: CYE 22 APSI Payments

			CYE 22 APSI Dollars	
Rate Cell	Contractor	GSA	with Premium Tax	
Dual	UnitedHealthCare	North	\$ 5,135	
Dual	Banner-UFC	South	\$ 14,050	
Dual	Mercy	South	\$ 11,458	
Dual	UnitedHealthCare	Central	\$ 29,077	
Dual	Banner-UFC	Central	\$ 12,568	
Dual	Mercy	Central	\$ 47,477	
Non-Dual	UnitedHealthCare	North	\$ 71,525	
Non-Dual	Banner-UFC	South	\$ 608,852	
Non-Dual	Mercy	South	\$ 220,609	
Non-Dual	UnitedHealthCare	Central	\$ 524,384	
Non-Dual	Banner-UFC	Central	\$ 318,949	
Non-Dual	Mercy	Central	\$ 1,311,252	
Total	\$ 3,175,336			



Appendix 2: CYE 22 Certified and Adjusted Capitation Rates

			Capitation Rates Effective 10/1/21 - 9/30/22		
			Cap Rates		Cap Rates with
Rate Cell	Contractor	GSA	without APSI	APSI PMPM	APSI
Dual	UnitedHealthCare	North	\$3,533.18	\$0.19	\$3,533.37
Dual	Banner-UFC	South	\$4,156.68	\$0.35	\$4,157.03
Dual	Mercy	South	\$4,062.17	\$0.47	\$4,062.64
Dual	UnitedHealthCare	Central	\$3,507.31	\$0.44	\$3,507.75
Dual	Banner-UFC	Central	\$4,407.40	\$0.53	\$4,407.93
Dual	Mercy	Central	\$4,420.74	\$0.53	\$4,421.27
Non-Dual	UnitedHealthCare	North	\$7,190.97	\$18.89	\$7,209.86
Non-Dual	Banner-UFC	South	\$7,796.30	\$100.16	\$7,896.46
Non-Dual	Mercy	South	\$7,817.37	\$51.79	\$7,869.16
Non-Dual	UnitedHealthCare	Central	\$8,346.19	\$50.10	\$8,396.29
Non-Dual	Banner-UFC	Central	\$9,483.03	\$72.92	\$9,555.95
Non-Dual	Mercy	Central	\$9,102.16	\$56.49	\$9,158.65

