

Year 3

Year 3 TI AHCCCS Online Application Portal
Year 3 Application Desk Aid
Year 3 Application Document Standards and Preparation
Area of Concentration Changes No Longer Permitted
Report Organization Changes
Year 3 Application Office Hours

Year 4

ASU Dashboard Update
Justice Survey and Matrix
Service Provider IDs
Year 4 – Quality Improvement Collaboratives (QICs) Meetings
Year 4 Milestones and Performance Measures
NCQA Health Outcomes Accreditation

General TI Information

ASU TIPQIC Data Harmonization
ASU TIPQIC Dashboards
Contact Us



Targeted
Investment
Program

YEAR 3 TI AHCCCS ONLINE APPLICATION PORTAL

The [Year 3 AHCCCS Online TI 2.0 Application Portal](#) is open and ready to accept Year 3 applications. The TI Portal opened on May 21, 2026 and **will close at 5:00PM AZ Time on June 22, 2026**. Refer to the [TI 2.0 Year 3 application webpage](#) for additional information on application requirements and resources.

Milestone 3 Application Document Requirements

Milestone M3M (HRSN Delegation Form) is intended for TI Organizations that partner with an Accountable Care Organization (ACO) or a Clinically Integrated Network (CIN).

- Organizations that use an ACO or CIN to facilitate referrals or screening for Non Medical Drivers of Health (NMDOH), formerly referred to as Health Related Social Needs (HRSN), for AHCCCS members must complete and upload the M3M HRSN Delegation Form in the Year 3 Application Portal. The form is available on the [TI Milestone webpage](#).
 - Organizations that do not use an ACO or CIN must upload a blank document for M3M in the Year 3 Application portal.
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YEAR 3 TI APPLICATION DESK AID

The TI Program Team has developed a [Year 3 TI Application Desk Aid](#) for TI participating organizations. This resource is available on the [Year 3 Application webpage](#). It provides clear and structured guidance to help participants successfully complete their applications.

YEAR 3 APPLICATION DOCUMENT STANDARDS AND PREPARATION

The following documentation requirements apply to the Targeted Investments Program (TI 2.0) Year 3 (10/1/2024 - 9/30/2025). Refer to the [TI 2.0 Year 3 application webpage](#) for additional information and resources.

- TI 2.0 participants must upload their organization's policies, procedures, protocols, reports, etc. that govern the application requirements.
- Uploaded documents must be final as required in the Milestone; each uploaded document must include a label as appropriate (e.g., Policy; Procedure; Protocol; Report).
- Uploaded documents must contain/address all elements specified in the Milestone and Document Validation documents.
- Each uploaded document must include the provider organization's Logo and/or name in the header.
- Participants are strongly encouraged to highlight, circle, or clearly annotate the exact elements of each uploaded document that meet the specific Milestone and Document Validation requirements. This assists reviewers to quickly locate the required elements and ensures a smoother audit process.

AHCCCS will not accept or consider when assessing Milestone attainment any documents that contain the following:

- PHI—no examples are requested
- Tracked changes or comments—must be final policies, protocols, and procedures as a PDF
- Photographs of documents—must be scanned, legible, PDF
- Documents without provider identification—must include Logo and/or name in header

Clinic Selection

- Identify all of the participating clinics in advance.
- Prepare clinic address information including suite numbers if applicable, and any other relevant identifiers to ensure accuracy and completeness.
- Validate that all sites participating have consistent information including NPI registry, APEP portal, and licensure information (if applicable).
- Ensure all clinics participating are matched to the correct provider type(s) for the Area of Concentration (BH, PCP, Justice). Review the Eligible Provider Type on the [TI Program website](#).

- Participants cannot add a new area of concentration in Year 3. If a participant is adding a new clinic, review the provider type and make sure it aligns with a current/active area of concentration for the participating TIN.

Reminder: Targeted Investments Program (TI 2.0) organizations must keep all information related to the TI 2.0 program for a period of seven years after the program ends due to the potential for post-pay audit.

AREA OF CONCENTRATION CHANGES NO LONGER PERMITTED

In Year 1 and Year 2 of the Targeted Investments Program (TI 2.0), participating organizations (by TIN) were allowed to add additional Areas of Concentration (AOCs) during the annual application/attestation process. Organizations are **no longer permitted to add new AOCs in Year 3 - Year 5**. The AOCs submitted in each Organization's Year 2 application will remain fixed for the remainder of the program. For questions, contact the TI team at targetedinvestments@azahcccs.gov.

REPORT ORGANIZATION CHANGES

Participants should ensure organization information is current by notifying the AHCCCS TI Team at targetedinvestments@azahcccs.gov. Participants are encouraged to report changes such as Organization (TIN) ownership changes, clinic closures, area of concentration changes, or program withdrawal updates.

Authorized User Updates

As of May 22, 2026, Organization can add new program Authorized Users or Delegates, by logging into the [AHCCCS Online Application TI Portal](#) and selecting the User Acceptance Agreement link. Organizations are encouraged to report these organizational updates through the AHCCCS Online TI Portal at anytime key staff changes. Keeping this information up-to-date is **crucial** for ensuring that important program details such as payment information are communicated to the appropriate individuals.

Note: Signed TI Participant User Acceptance Agreement Forms from prior program years will no longer be uploaded to the portal.

YEAR 3 APPLICATION OFFICE HOURS

AHCCCS has scheduled Office Hours dedicated to the AHCCCS Online TI Program Year 3 Application process. TI Providers can register for the sessions on the [TI Meetings webpage](#). For meeting information including meeting materials, contact the TI Team at the following email: targetedinvestments@azahcccs.gov.

Year 3 Ad Hoc Office Hours Session

The AHCCCS TI Team is offering an Ad Hoc Office Hour session on [June 19, 2026 at 12:00PM AZ Time](#) to support organizations as they complete their AHCCCS Online Year 3 Applications. The purpose of this meeting is help organizations clarify requirements and ensure your organization's application is complete and accurate prior to the June 22, 2026 5:00PM AZ Time application deadline. Email the TI Inbox at targetedinvestments@azahcccs.gov for questions.

Date Time (AZ Time)	Registration Link
Monday, June 15, 2026 12:00PM - 1:00PM	Register
Friday, June 19, 2026 12:00PM - 1:00PM	Register

ASU DASHBOARD UPDATE

ASU TIPQIC has upgraded from the MY 2023 HEDIS specifications to the MY 2025 HEDIS specifications for TI 2.0 Year 4 performance measures. These updates are now reflected in the measures dashboard.

To access your measures dashboard:

1. Navigate to data.tipqic.org
2. Each organization has a limited number of license holders. Only the approved license holders can access these dashboards. If you would like to remove or replace the current license holder(s) for your organization, please email support@tipqic.org
3. Click "Explore"
4. Choose "TIPQIC - TIP 2.0 Provider Dashboards"
5. Open the dashboard labeled "Measures Dashboard"

JUSTICE SURVEY AND MATRIX

ASU TIPQIC has sent all TI 2.0 Justice providers with approved clinics an updated Justice Clinic Information Spreadsheet and a Justice Referral End-Date Survey. Please complete both items by July 15, 2026. Email any questions or comments to tipqic@asu.edu and include targetedinvestments@azahcccs.gov.

SERVICE PROVIDER IDs

Providers in the TI 2.0 program participating in the Peds PCP, Adult PCP, Peds BH, and Adult BH AOCs may now submit updated AHCCCS billing and servicing provider IDs to ASU TIPQIC for performance measure calculations. Please send updated information to tipqic@asu.edu and include targetedinvestments@azahcccs.gov.

- Refer to the ASU TIPQIC Performance Measure resources here: <https://tipqic.org/measures.html>
- Refer to the AHCCCS TI Program website for Year 4 Milestone Resources: <https://www.azahcccs.gov/PlansProviders/TargetedInvestments/TI2.0/Milestones.html>

YEAR 4 – QUALITY IMPROVEMENT COLLABORATIVES (QICs) MEETINGS

Quality Improvement Collaborative (QIC) meetings are structured and facilitated by the ASU TIPQIC team to foster peer collaboration on meeting the TI 2.0 Milestones. Year 4 QIC requirements are available in detail on the [TI 2.0 Milestones webpage](#). While June QIC session attendance is optional, these meetings will provide important network updates and actionable insights that directly impact your Organization's HEDIS performance and long-term TI Program sustainability efforts. Please note that you will need to manually add the calendar invites to your respective calendar. We encourage clinical leadership, quality improvement staff, data analysts, and operational leads to attend as schedules permit.

Optional June 2026 QIC Dates/Times

- **Justice AOC Session #5: 6/17/26 from 12:00 to 1:00PM** - [Register here](#)
- **Adult PCP AOC Session #5: 6/23/26 from 12:00 to 1:00PM** - [Register here](#)
- **Adult BH AOC Session #5: 6/25/26 from 12:00 to 1:00PM** - [Register here](#)

For meeting information including meeting materials, contact the ASU Team at the following email: TIPQIC@asu.edu.

YEAR 4 MILESTONES AND PERFORMANCE MEASURES

Participating TI 2.0 Program Organizations should review the updated resources available on the [Milestones Webpage](#) to ensure compliance and successful milestone completion.

These resources include:

- [Year 4 Milestones Requirements](#) – This document outlines key Year 4 Performance Measures and Milestones deliverables. Please ensure that you are referencing the document dated 09/25/2025.
- [Performance Measure Targets](#) – This document outlines specific quality improvement goals that participating organizations must meet during Year 4. Performance measure targets are available for each area of concentration.
- [Performance Measure Detail Guides \(Including Attribution Methods\)](#) – TI Providers may refer to the ASU TIPQIC TIP 2.0 Measure Detail Guides to assist TI participating Providers with understanding the selected performance measures, attribution methods, and performance targets.
- [Data Harmonization / Performance Improvement](#) – Interested Organizations can work with the ASU TIPQIC team to examine AHCCCS members or member events eligible for each measure attributed to their organization:
<https://tipqic.org/perfimp.html>.

For questions about Performance Measures or to schedule an appointment, please submit a request through the ASU TIPQIC [Support Tickets](#) system.

NCQA HEALTH OUTCOMES ACCREDITATION

The AHCCCS TI 2.0 Program announces that 15 Organizations are pursuing NCQA Health Outcomes Accreditation (formerly NCQA Health Equity Accreditation) and have scheduled surveys. NCQA will host an Office Hour for participants on **June 24, 2026 at 12:00PM (AZ Time)**. For questions or support, contact the NCQA team at targetedinvestments@ncqa.org.

Year 4 Milestone Requirements for NCQA Participants

Organizations participating in the NCQA Health Outcomes Accreditation through the TI 2.0 Program must obtain accreditation by September 30, 2026. Accreditation Organizations that have already achieved full accreditation are not required to submit the M3C CLRS Y4 Referral Report for Milestone M3C. Instead, NCQA organizations will submit their NCQA Decision Letter to AHCCCS.

For organizations that do not obtained accreditation, Milestone M3C requires the upload of a referral report through the TI 2.0 Year 4 Application Portal, once available. The report must include at least five de-identified referral records related to nonmedical drivers of health for AHCCCS members and may be submitted as an aggregate report across clinics. Additional details are available on the [Year 4 Milestone document](#). A provisional accreditation notification cannot be submitted for Year 4 Milestones M3C or M3D.

ASU TIPQIC DATA HARMONIZATION

The ASU TIPQIC team offers an AHCCCS member list reconciliation consultation process called Data Harmonization which can help boost performance measure outcomes. During this process, the ASU TIPQIC team will examine AHCCCS members or member events eligible for each Performance Measure and compare it to a member list generated by the participating TI Organization. Organizations will receive a summary report that includes member-level details for each measure explored. Results will help to:

- Explore and explain differences in denominators and performance to identify reporting gaps
- Ensure consistent view of improved trends
- Identify process errors
- Identify additional members each practice is held accountable for

Learn more about Data Harmonization by visiting the [ASU TIPQIC Performance Improvement](#) webpage.

ASU TIPQIC DASHBOARDS

The ASU TIPQIC team has created three Tableau dashboards to help Organizations achieve their TI milestones. There are two PDF guides with step-by-step instructions on [accessing the dashboards](#) and [interpreting your data effectively](#) to help Organizations get started. If Organizations have any questions about their dashboards or need assistance accessing them, please email TIPQIC@asu.edu.

[View Dashboards](#)

CONTACT US

Stay connected with the TI Team by attending [Office Hour sessions](#), submitting a [Support Ticket](#), or contacting the AHCCCS TI team at targetedinvestments@azahcccs.gov.

Review past newsletters on the [TI Website](#).

Follow AHCCCS on social media



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