

Narrative Related to Data Profile

Overview

The data in this document covers two distinct groups:

- (1) Members under the Proposition 204 group *not* included in the Waiver Group – Coverage for these members derives from the State Plan. These groups are: Expansion SSI and AHCCCS for Families with Children (known also as Expansion TANF or parents).
- (2) Members included in Waiver Group – Coverage for these members derives solely from the AHCCCS 1115 Waiver. These groups are: AHCCCS Care (Childless Adults) and Medical Expense Deduction (MED or spend down). Under the guidance provided by Secretary Sebelius, eligibility for the Waiver Group is subject to change at the time the AHCCCS Waiver expires.

These groups are described below.

Expansion Populations Not Covered under 1115 Waiver (TANF, SSI)

➤ **Expansion TANF:** AFDC-Related Expansion: “AHCCCS for Families with Children”

AHCCCS for Families with Children is based on eligibility standards in Section 1931 of the Social Security Act, also referred to as "1931". This category covers members of families with a child who is deprived of parental support. The child may be deprived due to:

- Death of at least one parent;
- Continued absence of at least one parent;
- Unemployment, underemployment of parents when both parents live with the child; or
- Disability of at least one parent when both parents are living with the child.

The expansion group covers families with income between the AFDC income standard (36% of the 1992 FPL) and 100% of the FPL. Based on the current FPL, the AFDC income standard is approximately 22% of the FPL. (Not a Waiver Group).

➤ **Expansion SSI:** SSI-MAO Expansion: “SSI Medical Assistance Only (SSI MAO)”
The SSI Medical Assistance Only (SSI MAO) program is for individuals who are age 65 or older, blind, or disabled and do not receive SSI cash. (Not a Waiver Group).

Waiver Group—Expansion Populations Covered under Waiver (AHCCCS Care, MED)

➤ **MED:** “Medical Expense Deduction (MED)”

MED is for individuals or families whose income exceeds 100% of the FPL and who have medical expenses that reduce the countable income to less than 40% of the FPL. This group is also referred to as spend downs.

➤ **AHCCCS Care:** Childless Adults

AHCCCS Care is for adult individuals or couples who are not eligible as a family.

Data Collection Methodology

- Data represents utilization of services for dates of service 1/1/2009 – 12/31/2009.
- Data source is approved/adjudicated claims submitted by Managed Care Organizations, Fee-for-Service providers and other State Agencies providing medical services.
- Data does not include manual payments or reconciliation adjustments for the period analyzed; therefore, the amounts provided will not tie to other data sources such as the Arizona Financial Information System (AFIS), the Centers for Medicare and Medicaid Quarterly-64 reports, or health plan financials. Also, since the amounts provided are based on dates of service, they will not tie to the Appropriation Status Report Program Detail Sheets, which are based on dates of payment.

Enrollment Reports

The enrollment reports represent members enrolled in the program at a point in time. Note: More people may be served during the year than are enrolled at any point in time, as individuals enter and leave the program on a continuum.

For informational purposes, the enrollment is displayed by age (0-18, 19-20, and those 21 and over) by gender and by program.

Utilization reports

Included are three reports that display expenditures and members utilizing a particular service. All of the reports are segregated by the enrollment categories described above.

By Age

Displays expenditures for AHCCCS members segregated between members (0-20) and members (21 and older).

Any member who received a service that was paid by AHCCCS or an AHCCCS contractor is included as a utilizing member.

By Major Provider Category

Displays expenditures for AHCCCS members segregated between six provider categories. The categories of provider are as follows:

- Hospital – Includes inpatient and outpatient charges for all hospitals (including psychiatric hospitals).
- Practitioner – Includes services provided by Medical Doctors (MD), Doctor of Osteopathy (DO), Physician Assistant (PA), Nurse Practitioner (NP) and Dentist.
- Pharmacy – Includes medications provided by a pharmacy. If the medication was provided by a hospital or practitioner and billed by one of those provider types, it is not included under pharmacy. Additionally, medications provided and billed by an IHS facility are not included.
- Emergency Transport – Includes emergency transport services, such as ambulance services.

- Non-Emergency Transport – Includes non-emergency transport charges, such as wheelchair vans.
- All other – Includes services provided by all other providers.

Note: Please do not attempt to summarize the members by adding down the unduplicated members. Many members will receive service from more than one provider within the year. For example they may have a hospitalization and see a dentist during the year. Simply adding all of the utilizing members by provider category would count some members more than one time.

By Disease Category

Displays expenditures for AHCCCS members segregated by disease category. Only the primary diagnosis was utilized for purposes of this display. The major disease category is utilized to group similar diagnosis together for purposes of analysis. Examples of the specific diseases within the category are included in the description.

Expenditures are displayed grouped by Physical Health and Behavioral Health. Physical Health is further segregated into descriptive categories such as injuries and trauma, heart and circulatory, and cancers. Data is only displayed for which AHCCCS captures meaningful diagnosis information from the billing information. Significant services that are not included in this report are pharmacy, transportation and dental.

Note: Please do not attempt to summarize the members by adding down the unduplicated members. As in the other reports, utilizing members is not displayed in total. Members often have more than one disease. Simply adding all of the utilizing members by disease category would count members with more than one disease multiple times.

Enrollment on 1/1/2009 and 1/1/2010
Members part of Proposition 204 - Not included in Waiver Group
Members included in Waiver Group

Enrolled Members

	Members who are included in Proposition 204 who are not included in Waiver Group			Members included in Waiver Group		
	Expansion SSI ¹	Expansion TANF ²	Not Impacted	MED	AHCCCS Care	Potentially impacted
1/1/2009						
By Age						
Children (0-18)	1	5,902	5,903	913	3	916
Young adult (19-20)	19	2,785	2,804	73	14,582	14,655
EPSDT members (0-20)	20	8,687	8,707	986	14,585	15,571
Adults (21 +)	24,236	97,156	121,392	3,303	115,499	118,802
	24,256	105,843	130,099	4,289	130,084	134,373
By Gender						
Male	9,560	39,691	49,251	2,286	69,910	72,196
Female	14,696	66,152	80,848	2,003	60,174	62,177
	24,256	105,843	130,099	4,289	130,084	134,373
By Program						
Capitated	23,101	73,621	96,722	4,208	116,181	120,389
AIHP FFS ³	1,145	5,821	6,966	81	13,903	13,984
FES FFS	10	26,401	26,411	-	-	-
	24,256	105,843	130,099	4,289	130,084	134,373

1/1/2010

By Age						
Children (0-18)	4	11,458	11,462	746	1	747
Young adult (19-20)	27	3,481	3,508	62	24,781	24,843
EPSDT members (0-20)	31	14,939	14,970	808	24,782	25,590
Adults (21 +)	24,726	134,325	159,051	4,171	175,251	179,422
	24,757	149,264	174,021	4,979	200,033	205,012
By Gender						
Male	9,895	57,677	67,572	2,697	111,145	113,842
Female	14,862	91,587	106,449	2,282	88,888	91,170
	24,757	149,264	174,021	4,979	200,033	205,012
By Program						
Capitated	23,598	113,824	137,422	4,834	181,283	186,117
AIHP FFS ³	1,150	7,658	8,808	145	18,750	18,895
FES FFS	9	27,782	27,791	-	-	-
	24,757	149,264	174,021	4,979	200,033	205,012

Notes

¹Expansion SSI This portion of the Proposition 204 population was not included in the waiver request to CMS, therefore they would continue to receive coverage under AHCCCS if the waiver is granted.

²Expansion TANF This portion of the Proposition 204 population was not included in the waiver request to CMS, therefore they would continue to receive coverage under AHCCCS if the waiver is granted.

³ AIHP FFS The American Indian Health Plan does not include all American Indians in the AHCCCS program. American Indians may also select to enroll in a Managed Care Organization.

Expenditures by eligibility category and age
Expenditures part of Proposition 204 - Not included in Waiver Group
Expenditures included in Waiver Group
01/01/2009 - 12/31/2009

Expenditures related to members who are included in Proposition 204 categories who are not included in the Waiver Group

Expenditures related to members who are included in the Waiver Group

Expansion SSI ¹ Expansion TANF ² Not Impacted

MED AHCCCS Care Potentially impacted

Expenditures

Members (0-20)	\$190,853	\$24,508,402	\$24,699,255	\$16,853,246	\$69,276,379	\$86,129,625
Members (21 +)	\$95,222,792	\$324,595,816	\$419,818,608	\$184,981,559	\$1,337,325,126	\$1,522,306,685
	<u>\$95,413,645</u>	<u>\$349,104,218</u>	<u>\$444,517,863</u>	<u>\$201,834,805</u>	<u>\$1,406,601,505</u>	<u>\$1,608,436,310</u>

Notes

¹Expansion SSI This portion of the Proposition 204 population is not covered under the Waiver; therefore they would continue to receive coverage if the Waiver renewal is amended.

²Expansion TANF This portion of the Proposition 204 population is not covered under the Waiver. Coverage for this group can only be restricted if CMS rules on the MOE waiver request, which is still pending.

Expenditures and utilizing members by major provider category							
Expenditures part of Proposition 204 - Not included Waiver Group							
Expenditures included in Waiver Group							
01/01/2009 - 12/31/2009							
		Expenditures related to members who are included in Proposition 204 categories who are not included in the Waiver Group			Expenditures related to members who are included in the Waiver Group		
		Expansion SSI ¹	Expansion TANF ²	Not Impacted	MED	AHCCCS Care	Potentially impacted
Expenditures							
Hospital	includes Inpatient and Outpatient for Hospitals (including Psychiatric Hospitals)	\$25,785,731	\$146,871,848	\$172,657,579	\$139,688,806	\$658,622,450	\$798,311,256
Practitioner	includes MD, DO, NP, PA, and Dentist	\$19,711,786	\$102,695,482	\$122,407,268	\$38,315,782	\$300,483,472	\$338,799,254
Pharmacy	excludes medications included in hospital/practitioner claim and those provided through IHS clinics	\$5,500,726	\$40,210,021	\$45,710,747	\$6,357,022	\$150,833,507	\$157,190,529
Emergency Transportation		\$1,710,807	\$7,472,212	\$9,183,019	\$5,628,828	\$42,938,226	\$48,567,054
Non-Emergency Transportation		\$6,185,524	\$3,378,449	\$9,563,973	\$1,055,876	\$23,660,640	\$24,716,516
All Other Services	includes services such as laboratory, PT/OT/Speech, radiology, durable medical equipment	\$36,519,071	\$48,476,207	\$84,995,278	\$10,788,490	\$230,063,212	\$240,851,702
		\$95,413,645	\$349,104,219	\$444,517,864	\$201,834,804	\$1,406,601,507	\$1,608,436,311
Utilizing Members³							
Hospital	includes Inpatient and Outpatient for Hospitals (including Psychiatric Hospitals)	16,130	73,262	89,392	15,194	139,550	154,744
Practitioner	Includes MD, DO, NP, PA, and Dentist	25,447	139,822	165,269	18,524	207,953	226,477
Pharmacy	excludes medication provided by hospital, practitioner or IHS facility	12,777	114,969	127,746	10,595	176,153	186,748
Emergency Transportation		5,130	7,450	12,580	4,129	28,718	32,847
Non-Emergency Transportation		8,262	8,260	16,522	1,848	40,774	42,622
All Other Services	includes services such as laboratory, PT/OT/Speech, radiology, durable medical equipment	19,056	87,883	106,939	9,242	154,956	164,198
Notes							
¹ Expansion SSI	This portion of the Proposition 204 population is not covered under the Waiver; therefore they would continue to receive coverage if the Waiver renewal is amended.						
² Expansion TANF	This portion of the Proposition 204 population is not covered under the Waiver. Coverage for this group can only be restricted if CMS rules on the MOE waiver request, which is still pending.						
³ Utilizing Members	Members will receive services from more than one provider. Therefore the total is not meaningful and is not provided.						

Expenditures by disease category								
Expenditures part of Proposition 204 - Not included Waiver Group								
Expenditures included in Waiver Group								
		Services received by members who are included in Proposition 204 categories who are not included in the Waiver Group			Services received by members who are included in the Waiver Group			
		Expansion SSI ¹	Expansion TANF ²	Not Impacted	MED	AHCCCS Care	Potentially impacted	
<u>Category of Disease/Condition</u>	<u>Description ³</u>	<u>Utilizing members ⁵</u>			<u>Utilizing members ⁵</u>			
Physical Health								
Injuries including trauma	includes fractures, head trauma, burns	6,650	26,199	32,849	5,026	60,069	65,095	
Heart and circulatory	includes heart attacks, heart dysrhythmia, high blood pressure, stroke	12,268	16,001	28,269	5,888	47,199	53,087	
Musculoskeletal system	includes disorders of joints, back, spine including osteoarthritis and rheumatoid arthritis	13,159	40,965	54,124	5,548	84,239	89,787	
Digestive System disease	includes acute appendicitis, gall bladder disease, disease of pancreas, liver disease	6,348	22,664	29,012	4,708	48,213	52,921	
Respiratory diseases	includes asthma, emphysema (COPD), pneumonia, respiratory infections	9,211	44,291	53,502	5,697	67,350	73,047	
Cancers	includes breast cancer, colon cancer, lung cancer, prostate, cervical and other cancers	3,871	7,220	11,091	1,893	16,873	18,766	
Genitourinary System issues	includes kidney stones, disorders of urethra and urinary tract, kidney infections, endometriosis	6,011	35,394	41,405	3,472	47,422	50,894	
Diabetes and kidney disease	includes diabetes and cost related to acute and chronic kidney failure as frequently kidney failure is associated with diabetes	7,500	10,058	17,558	2,909	26,072	28,981	
Nervous system and senses	includes cerebral palsy, epilepsy, seizures, Alzheimer's disease, as well as eye and ear problems	9,581	27,783	37,364	3,515	51,968	55,483	
Infectious and Parasitic Disease	includes septicemia (infection in the blood), hepatitis, HIV, pulmonary tuberculosis, coccidioidomycosis	3,272	14,984	18,256	1,721	26,801	28,522	
Skin and Subcutaneous Tissue	includes cellulitis and abscess, chronic skin ulcers, psoriasis	4,419	15,448	19,867	2,198	32,907	35,105	
Pregnancy and newborn related	includes normal pregnancy and newborn care and complications related to pregnancy	63	8,751	8,814	319	6,568	6,887	
Other physical disorders	Physical disorders not classified above such as examination related to preventative health and treatment for conditions such as respiratory symptoms or abdominal symptoms.	20,245	107,857	128,102	14,552	167,260	181,812	
Behavioral Health	includes cognitive disability, schizophrenic disorders, depression, mood disorders	9,670	24,205	33,875	3,650	69,376	73,026	
Notes								
¹ Expansion SSI	This portion of the Proposition 204 population is not covered under the Waiver; therefore they would continue to receive coverage if the Waiver renewal is amended.							
² Expansion TANF	This portion of the Proposition 204 population is not covered under the Waiver. Coverage for this group can only be restricted if CMS rules on the MOE waiver request, which is still pending.							
³ Description	The specific diseases listed under description are provided for explanatory purposes only and are not intended to represent an all-inclusive list.							
⁴ Total By Diagnosis	Includes services in which AHCCCS captures a meaningful diagnosis from the billing information. Significant services that are not included are Pharmacy, Transportation, and Dental.							
⁵ Utilizing Members	Members may have received treatment for more than one health condition or may have had multiple episodes of care for the same condition. Therefore the total is not meaningful and is not provided.							