



## Welcome to the SMAC Quarterly Meeting

While you are waiting test your audio.

LISTEN FOR MUSIC.

You were automatically muted upon entry.

Please only join by phone or computer.

Please use the chat feature for questions or raise your hand.

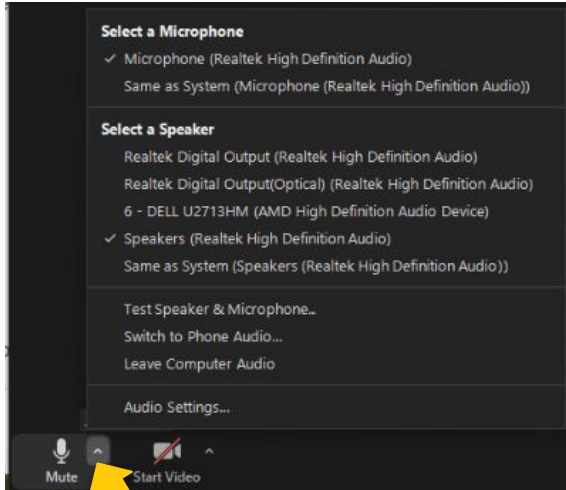


Thank you.

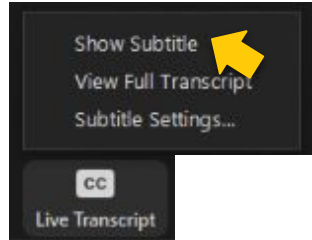
# Zoom Webinar Controls

Navigating your bar on the bottom...

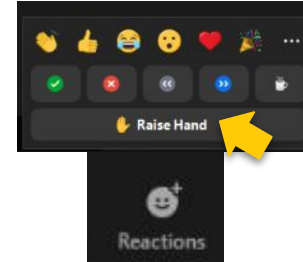
Audio Settings



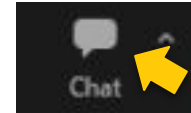
Turn on Closed Captioning



Raise Hand



Chat

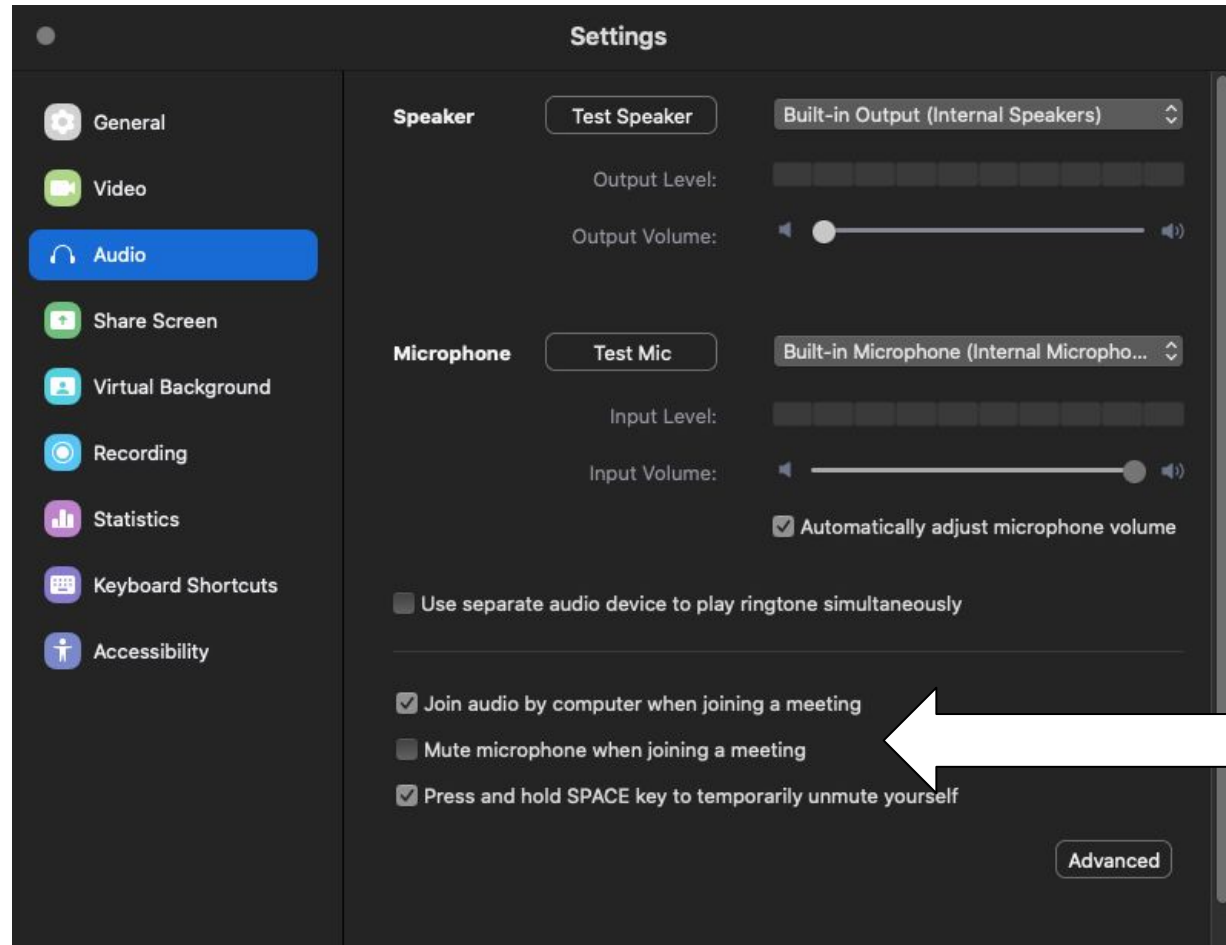


## KEYBOARD SHORTCUTS TO RAISE HAND

**Windows:** Alt+Y to raise or lower your hand

**Mac:** Option+Y to raise or lower your hand

# Audio Settings



The screenshot shows the Zoom application's settings window, specifically the Audio section. On the left is a sidebar with various settings categories: General, Video, Audio (highlighted in blue), Share Screen, Virtual Background, Recording, Statistics, Keyboard Shortcuts, and Accessibility. The main panel is titled 'Settings' and is divided into two sections: 'Speaker' and 'Microphone'. The 'Speaker' section includes a 'Test Speaker' button, a dropdown menu for 'Built-in Output (Internal Speakers)', an 'Output Level' bar, and an 'Output Volume' slider. The 'Microphone' section includes a 'Test Mic' button, a dropdown menu for 'Built-in Microphone (Internal Micropho...', an 'Input Level' bar, an 'Input Volume' slider, and a checked checkbox for 'Automatically adjust microphone volume'. Below these sections are several checkboxes: 'Use separate audio device to play ringtone simultaneously' (unchecked), 'Join audio by computer when joining a meeting' (checked), 'Mute microphone when joining a meeting' (unchecked), and 'Press and hold SPACE key to temporarily unmute yourself' (checked). A white arrow points from the right edge of the image towards the 'Join audio by computer when joining a meeting' checkbox. At the bottom right of the settings panel is an 'Advanced' button.

# Tips for successful ZOOM PARTICIPATION



MUTE your mic  
when you're not  
speaking



BACKGROUND  
NOISE watch when  
turning on mic



Limit the  
DISTRACTIONS  
around you



Look at the  
CAMERA  
not your screen



PREPARE & queue  
docs or links that  
you plan to share



Stay FOCUSED by  
not texting or side  
conversations



Use GALLERY  
VIEW to see all  
participants



Use CHAT to ask  
questions or share  
resources

# This Meeting Is Being Recorded

**The recording shall be the sole property of AHCCCS and participation in this meeting indicates your waiver of any and all rights of publicity and privacy.**

**Please disconnect from this meeting if you do not agree to these terms.**



# State Medicaid Advisory Committee (SMAC) Quarterly Meeting

April 10, 2024



# AHCCCS CEO Updates

## Carmen Heredia

- The State Medicaid Advisory Committee members have been added to the Subject Matter Expert Contact List on the AHCCCS intranet ([HUB](#)).
- We are looking for partners to speak to the media about AHCCCS as opportunities arise. If you are interested, please fill out this short [Google survey](#), capturing areas where we might ask for your expertise and assistance.





# Agency Successes: 2023 in Review



# Reimbursement for Community Health Workers and CHW Organizations

# Community Health Worker/ Community Health Representative

A **frontline public health worker** who is a trusted member of the community to help people:

- Navigate health care system,
- Encourage preventive care,
- Manage chronic illnesses,
- Maintain healthy lifestyles, and
- Assist in culturally and linguistically relevant ways.



# CHW Reimbursement Pathways

## Phase One: CHWs - **Effective April 1, 2023**

CHW/CHR obtains certification



CHW/CHR is employed by a currently registered provider.



CHW/CHR delivers a covered service within their scope of practice.



Registered provider submits a claim for the covered service provided by the CHW/CHR.



## Phase Two: CHW Organizations - **Effective March 4 2024**

CHW/CHR obtains certification



CHW/CHR is employed by a CHW/CHR organization.



CHW/CHR delivers a covered service within their scope of practice.



CHW organization submits a claim for the covered service provided by the CHW/CHR.

CHW/CHR organization will enroll with AHCCCS through the AHCCCS provider enrollment process.



**Medicaid Claim Reimbursement**

# AHCCCS Support of CHWs

Visit the AHCCCS CHW webpage  
to learn more!

<https://www.azahcccs.gov/CHW>

Includes:

Training Video

Links to ADHS Certification  
FAQs



# KidsCare Expansion & Parents as Paid Caregivers

# KidsCare Expansion & Parents as Paid Caregivers



Gov. Katie Hobbs said expanding the KidsCare and the Parents as Paid Caregivers programs would not just help the children who would be able to get care, but would be “a smart investment that will protect our collective futures.” (Photo by [Kayla Jackson](#)/Cronkite News)

PHOENIX – State officials said Tuesday they have been given federal approval to expand income eligibility for the state’s KidsCare program, a change that could add 10,000 children to the low-cost health care program run by the state.

# Parents as Paid Caregivers Updates

- 2020: In response to COVID-19 PHE, AHCCCS submitted and received approval for an Appendix K waiver amendment to allow for payments to parents providing caregiving services to minor children.
- September 2023: Based on stakeholder feedback, the agency submitted a request to make this a permanent feature of the ALTCS program.
- February 2024: CMS approves AHCCCS' request to permanently implement the Parents as Paid Caregivers (PPCG) program.





# Parents as Paid Caregivers FAQs

Parents as Paid Caregivers of Minor Children Frequently Asked Questions can be found on our website:

[www.azahcccs.gov/AHCCCS/Downloads/COVID19/FAQ\\_ParentsAsPaidCaregivers.pdf](http://www.azahcccs.gov/AHCCCS/Downloads/COVID19/FAQ_ParentsAsPaidCaregivers.pdf)



# Traditional Healing Progress

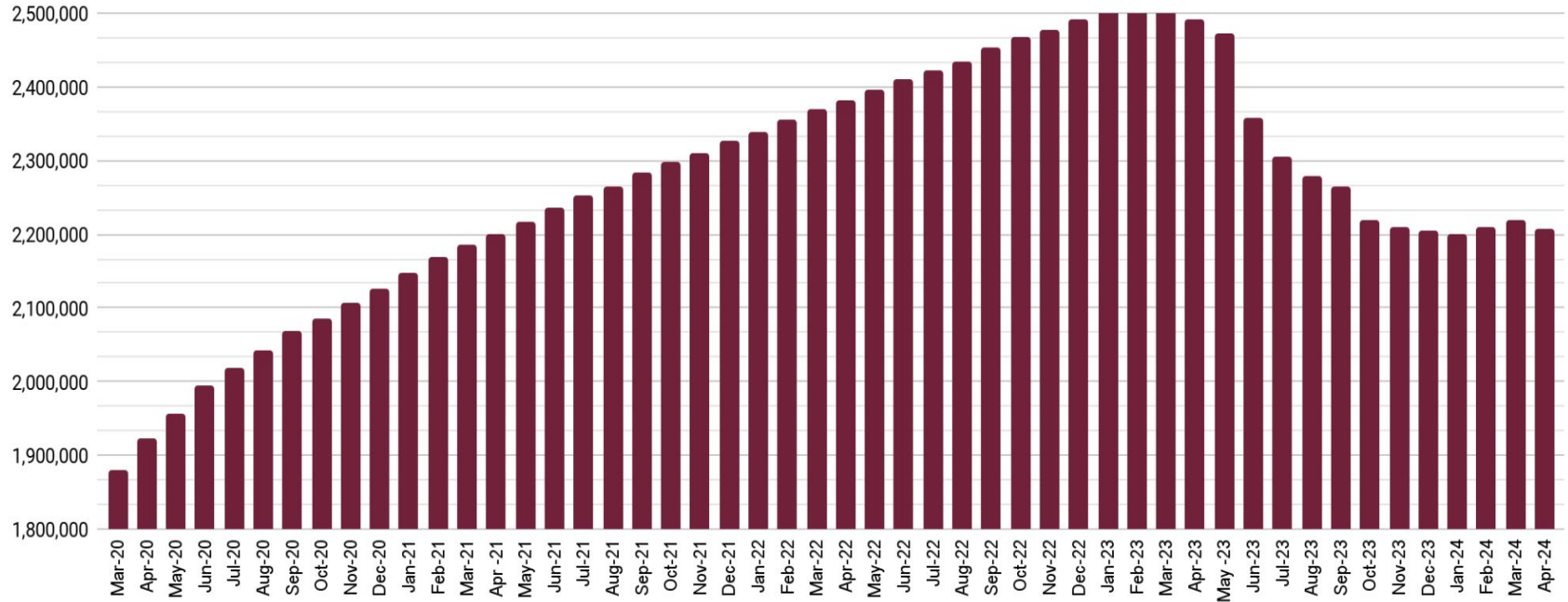
# Traditional Healing Waiver Updates

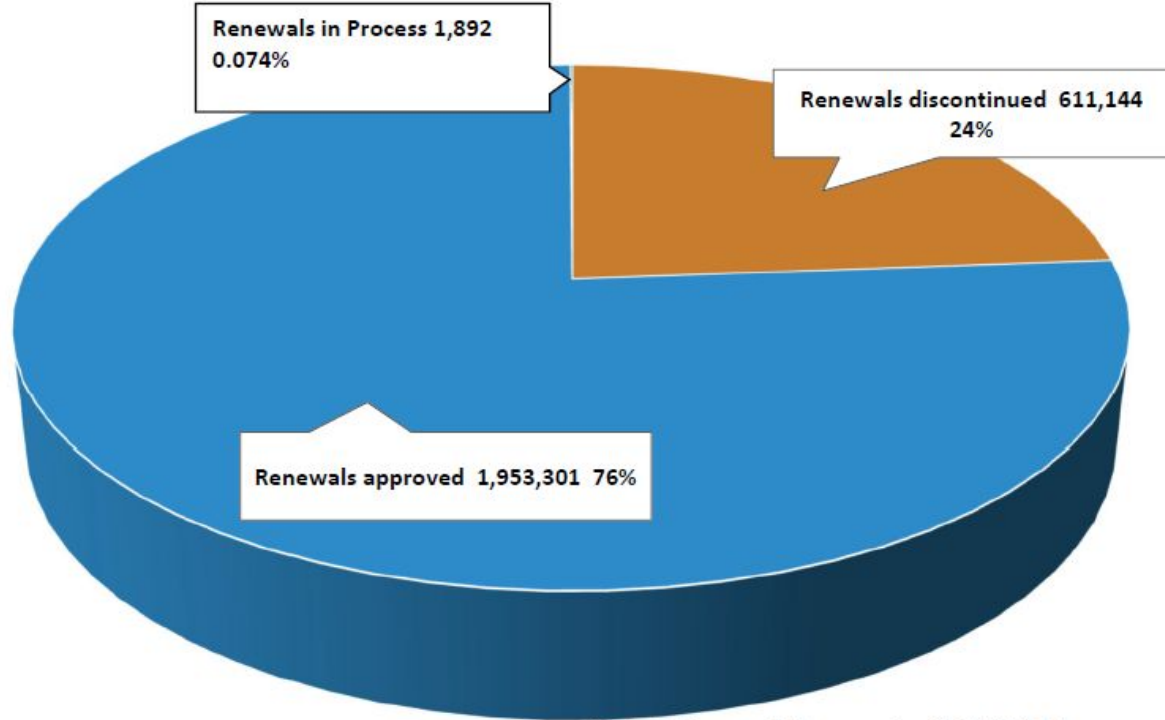
- ✓ Program development guided by external Traditional Healing Workgroup
  - IHS Area Offices, Tribal 638s, Urban Indian Organizations, AZ Advisory Council on Indian Healthcare, Inter Tribal Council of AZ, traditional healers
- ✓ Submitted final proposal to CMS
- ✓ Positive negotiations with CMS
- ☐ Awaiting final decision from CMS, possibly during the summer '24.



# Unwinding From the Public Health Emergency

# AHCCCS Population: March 2020 - April 2024





Total Planned Renewals: 2,545,454

\*Total Renewals Completed: 2,564,445

Subscribe to News and Press Releases Updates

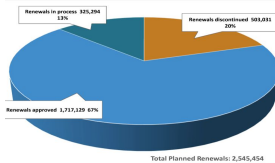
Subscribe at [www.azahcccs.gov/shared/news.html](http://www.azahcccs.gov/shared/news.html)



## [AHCCCS Encourages Parents to Apply for KidsCare Health Insurance](#)



## [Community Health Worker Organizations Added as an AHCCCS Provider Type](#)



## [Return to Regular Medicaid Renewals in April 2024](#)

# On the Horizon

- **ALTCS E/PD contracts start 10/1/24**
- **1115 Approval Implementation (10/1/2024)**
  - Targeted Investments 2.0
  - Housing and Health Opportunities Demonstration (H20)
- **CMS Negotiations Continuing**
  - Reimbursement for traditional healing services
  - Reimbursement for services pre-release
  - Former foster youth continuous eligibility
- **MES Roadmap**
  - Awarded a System Integrator (SI) contract; will begin implementation upon CMS approval
- **ARP Program Awards for HCBS providers**
  - 1st round awarded \$17 million
- **Continued roll out of CommunityCares (Closed-Loop Referral System)**
- **Full implementation of CHW services**
- **Continued support for the [Opioid Services Locator](#) tool**
- **Continued system improvements to combat fraudulent billing and member exploitation**



# Open Discussion



## Targeted Investments Updates

Cameron Adams, Program Administrator, Division of  
Health Care Services

# Targeted Investments Programs

## Initial Program (TI)

- 10/2016 - 9/2022
- 6 Years, \$350 m.
- Reduce fragmentation of Behavioral Health (BH) and primary care (PCP)
- Increase provider coordination, integration at point of care
- Population Health: Identify and manage care for high risk/ high needs members
- Support providers throughout payor integration (ACC)

## Renewal Program (TI 2.0)

- 10/2022 - 9/2027
- 5 Years, \$250 m.
- Reduce fragmentation of BH, PCP, and health related social needs (HRSN)
- Increase provider coordination with community partners
- Population Health: Identify and address health inequities
- Support providers and system throughout CLRS implementation

# TI 2.0 Participation

# TI 2.0 Provider Types

<p><b>PCP</b> Adult and Peds</p>	<p><b>BH</b> Adult and Peds</p>	<p><b>Justice</b> Adult</p>
<p><b>Non-Specialty PCP Outpatient Clinics</b></p> <p>Integrated Outpatient Clinics (IC)</p> <p>Non-Hospital Affiliated Clinic (05)</p> <p>Non-Integrated Primary Care Outpatient Clinics (under an 01-group)</p> <p><b>Non-facility PCP Providers Working In the Clinics</b></p> <p>MD-Physician DO-Physician Osteopath Registered Nurse Practitioner Physicians Assistant</p> <p><i>With Specialties:</i> Family Practice General Practice Internal Medicine Obstetrician and/or Gynecology Pediatrician Registered Nurse Practitioner</p>	<p><b>Outpatient BH Clinics</b></p> <p>Integrated Outpatient Clinics (IC)</p> <p>Behavioral Health Outpatient Clinics (77)</p> <p><b>Non-facility BH Providers Working In the Clinics</b></p> <p>MD-Physician DO-Physician Osteopath Licensed independent Substance Abuse Counselor (LISAC) Licensed Clinical Social Worker (LCSW) Psychologist Licensed Marriage &amp; Family Therapist (LMFT) Licensed Professional Counselor (LPC) School Based Guidance Counselor School Based Certified School Psychologist Behavioral Health Counselor Board Certified Behavioral Analyst Provider MHS Social Worker MHS Nurse- Psychologists Registered Nurse Practitioner</p>	<p><b>Outpatient Clinics With Reliable Access to PCP and BH Services</b></p> <p>Integrated Outpatient Clinics (IC)</p> <p>Federally Qualified Health Center (C2)</p> <p>Rural Health Centers (29)</p> <p>Behavioral Health Outpatient Clinics (77)</p> <p><b>Competitive by Population Served</b> Application demonstrates robust collaborative agreements with a justice partner (e.g. Clinics co-located with or adjacent to probation, parole facilities, court, diversion)</p>

# CHC Participation

**FQHC and RHCs only eligible to participate in Justice unless affiliated with a special county healthcare district**

- Maximize funds for outpatient providers that are not otherwise reimbursed for TI 2.0-related activities
- CHC: PPS reimbursement at cost
- Set funding: more participants = less payment per participant

# Participation

## TI 1.0

- Site and clinic specific participation level

## TI 2.0

- Provider participation is at an organization (Tax ID) level
- Multi-site organizations can apply for all eligible sites & earn incentive based on organization's performance
- Except justice clinics which will remain at site level due to community collaboration requirements

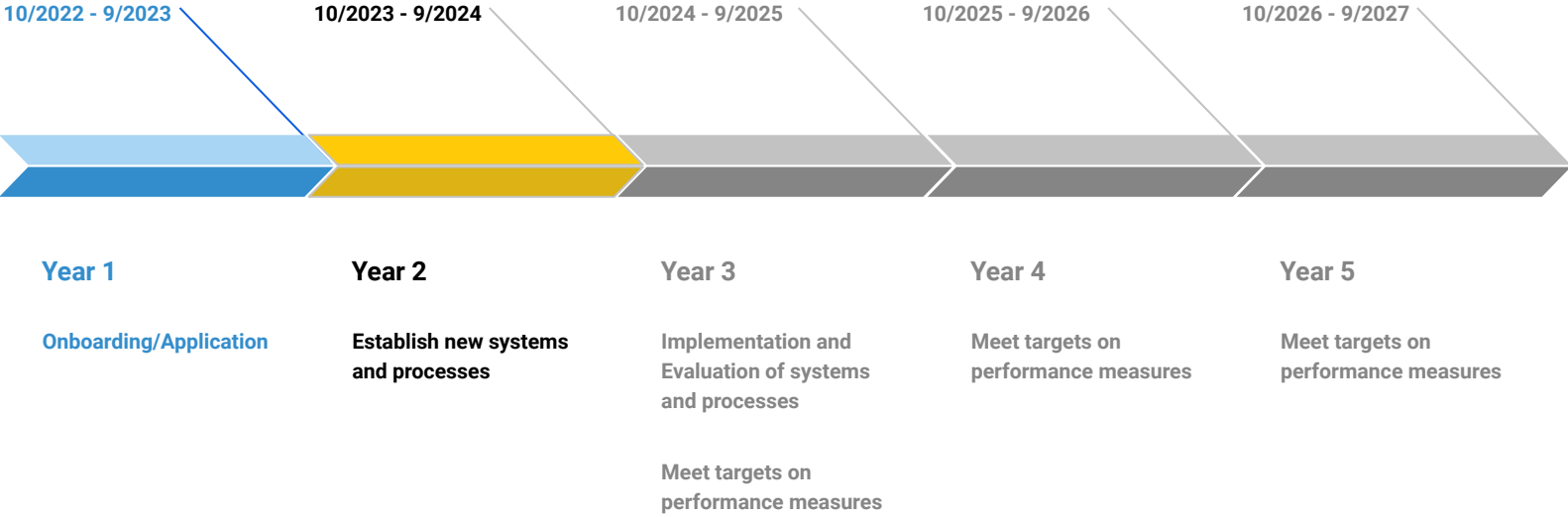
# Participation

Area of Concentration	TI 1.0		TI 2.0	
	Organizations	Clinics	Organizations	Clinics
Adult BH	33	147	64	TBD*
Adult PCP	42	150	67	TBD*
Peds BH	32	110	45	TBD*
Peds PCP	34	82	55	TBD*
Justice	5	13	17	57
<b>Any/All</b>	<b>97</b>	<b>350</b>	<b>145</b>	<b>TBD*</b>

\*Anticipating to finalize clinic validation in May, 2024



# TI 2.0 Timeline



# Structure (2023 - 2025)

## Year 1: Onboarding/Application (10/2022 - 9/2023)

- Develop **foundational policies and protocols** (submitted for AHCCCS review)
- Commitment to bi-directionally connecting to the HIE 3.0 platform

## Year 2: Create Policies (10/2023 - 9/2024)

- Implement **foundational policies and protocols** by end of year
- Participate in the Quality Improvement Collaborative
- Develop **TI 2.0 policies and protocols** related to new initiatives (submit for AHCCCS review)

## Year 3: Implement Policies (10/2024 - 9/2025)

- Continue implementing **foundational policies and protocols**
- Participate in the Quality Improvement Collaborative
- Demonstrate implementation of **TI 2.0 policies and protocols** (internal audit)
- Meet targets on performance measures

# Structure (2026 - 2027)

## Year 4: Performance Metrics (10/2025 - 9/2026)

- Bidirectionally share data with the HIE 3.0
- Participate in Quality Improvement Collaborative
- Meet targets on performance measures

## Year 5: Performance Metrics (10/2026 - 9/2027)

- Bidirectionally share data with the HIE 3.0
- Participate in Quality Improvement Collaborative
- Meet targets on performance measures

# Year 2 - Year 3 Process Milestones

## 10/2023 - 9/2025

# Year 2 - Year 3 Process Milestones

## All Participants

- CLAS Standards\*
- Health Equity\*
- Health Related Social Needs
- Community Cares

## Pediatric PCP

- Onsite Dental Varnish

## Postpartum Depression Screening

- Adult BH
- Adult PCP
- Pediatric PCP

## Justice

- Early Reach-In
- Tobacco Cessation

\*Earning NCQA Health Equity Accreditation is one path of satisfying these milestones

# Year 2 Process Milestone Validation

## Participants will:

- Develop required processes and policies
- Confirm “required elements” are included
  - will be published in April
- Upload processes and policies to the application portal
  - portal available in the Fall

# Year 3 Process Milestone Validation

## Participants will:

- Upload remaining required processes and policies with required elements into the application portal
- Conduct random sample to confirm Year 2 processes followed 85% of the time
- Provide the numerator and denominator (numbers) for each milestone.
- Maintain documentation internally for 7 years

# Flexibility

## Separate General HRSN-Process and CLRS (Electronic System) Milestones

- CBO partner must contribute to development of referral processes
- Can't penalize participants if CBO does not want to use CLRS
- CLRS not the best option for all scenarios

## Other CLRS Conditionally Allowed

- Many participants and/or nearby CBOs already use another CLRS
- Screening always completed at point of care, but some centralize referral activities (e.g., ACOs)
- Participants can use this system if the participant and/or sponsor (e.g., MCO, ACO, CIN, county) sends AHCCCS referral-level data





# Performance Measures (Y4 and Y5)

# Performance Measures

- Planned for Y3 - Y5 (2025 - 2028)
- Pending CMS recommendations, AHCCCS response, mutual agreement
- Thorough and clear methodologies are paramount- will advocate to postpone until Year 4 if not finalized by the Summer 2024

# Performance Measures

## AHCCCS will seek to align performance measures with:

- Participant and stakeholder input
- CMS ScoreCard measures
- AHCCCS/ MCO Withhold measures
- MCO/ Provider VBP Measures
- NCQA HEDIS<sup>®</sup> methodologies
- TI 1.0 measures
- Measures with observed inequities
- Reliable claims-only methodologies

# TI 2.0 Years 2-5 Performance Measures Example\*

- Portion of payment tied to meeting or exceeding performance measure targets
- Based on services provided in the Program Year
- Aligned with national stewards

Updated:10/27/2021

## TI Year 4 – 6 Metrics with Methodology

Measurement Stewards Key			
CMS Core Set PEDS Adult	CMS ScoresCard	Statewide (STC)	NCOA HEDIS
●	●	●	●

Pediatric PCP		
Chosen Performance Measure	Measure Description	Measurement Stewards
Well child visits in third, fourth, fifth and sixth years of life	Percentage of children ages 3 to 6 who had one or more well-child visits with a primary care practitioner (PCP) during the measurement year.	● ● ● ●
Adolescent well-care visits	Percentage of adolescents ages 12 to 21 who had at least one comprehensive well-care visit with a primary care practitioner (PCP) or an obstetric/gynecologic (OB/GYN) practitioner during the measurement year.	● ● ●
Well-child visits in the first 15 months of life	Percentage of children who turned 15 months old during the measurement year and who had the following number of well-child visits with a primary care practitioner (PCP) during their first 15 months of life: --No well-child visits --One well-child visit --Two well-child visits --Three well-child visits --Four well-child visits --Five well-child visits --Six or more well-child visits	● ● ●

Pediatric BH		
Chosen Performance Measure	Measure Description	Measurement Stewards
Pediatric follow-up after hosp. for mental illness ages 6-17 (30 - Day)	Percentage of discharges for children ages 6 to 17 who were hospitalized for treatment of selected mental illness or intentional self-harm diagnoses and who had a follow-up visit with a mental health practitioner. --Percentage of discharges for which the child received follow-up within 30 days after discharge	● ● ●
Pediatric follow-up after hosp. for mental illness ages 6-17 (7 - Day)	Percentage of discharges for children ages 6 to 17 who were hospitalized for treatment of selected mental illness or intentional self-harm diagnoses and who had a follow-up visit with a mental health practitioner. --Percentage of discharges for which the child received follow-up within 7 days after discharge	● ● ●
Metabolic monitoring for children and adolescents on antipsychotics	Assesses the percentage of children and adolescents with ongoing antipsychotic medication use who had metabolic testing during the year.	●

\*\*These are the TI 1.0 Measures for Example Only\*\*

A photograph of several hands of different skin tones stacked together in a circle, symbolizing support and unity. The image is overlaid with a semi-transparent yellow filter. The word "Support" is centered in the middle of the hands.

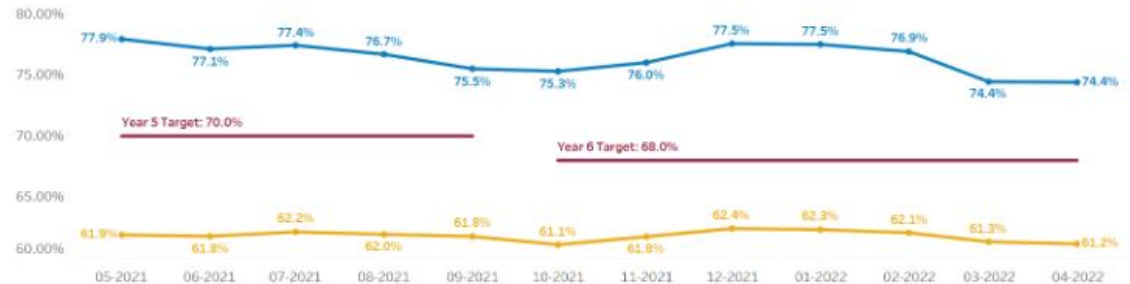
# Support

# Quality Improvement Collaborative (QIC)

Quality Improvement Collaborative (QIC) & QI (Quality Improvement) Workgroup network of support from AHCCCS, ASU, MCOs, CBOs and other program participants

- Evaluate performance on select quality measures and assists providers in improving performance
- Share best practices for policies and procedures
- Process improvement project due biannually
- Assistance with implementing process improvement techniques

Performance on Measure (Each month is a 12-month report period)



The **Justice** QIC will kickoff in January 2022.

- For specific information on the date, agenda and recording, please refer to the Y6 Justice QIC page.

For a more comprehensive list of specific Year 6 Virtual QIC sessions dates, see: [TIP Year 6 Virtual QIC Dates By Month](#)

Additional information regarding the next phase of the Targeted Investments program, including provider Q&A was discussed at the October 15th, 2021 TI Town Hall Year 6 Program Extension & Update. Any follow up questions can be directed to AHCCCS TI at e-mail: [targetedinvestments@azahcccs.gov](mailto:targetedinvestments@azahcccs.gov).

# Dashboards & Analyses

- New, expanded scope of measures - maternal health, dental, justice, etc.
- Dashboard enhancements: New equity and HRSN performance for Providers, MCOs, TIP
- New ARCS root cause graphs for equity/ HRSN
- Data harmonization/ - attribution improved, assess equity and HRSN
- Data sources expanded

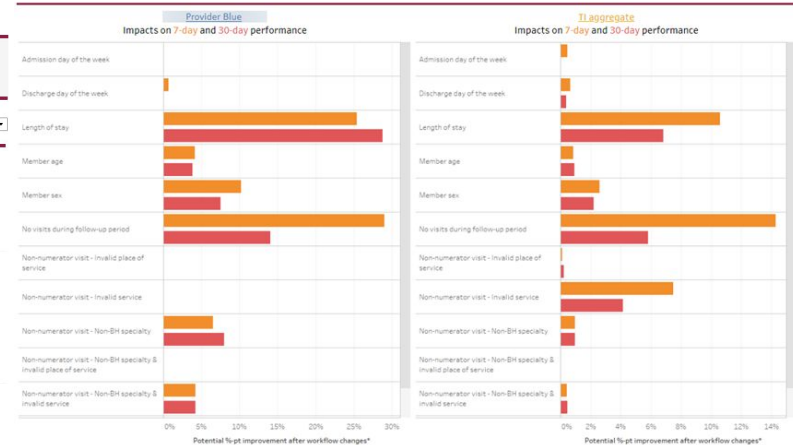
# Data Harmonization

- Compares AHCCCS members in providers' internal reports to members attributed by TIP
- Benefits:
  - Builds trust in providers' reported performance
  - Identifies data gaps
  - Improves internal reports
- Example\*



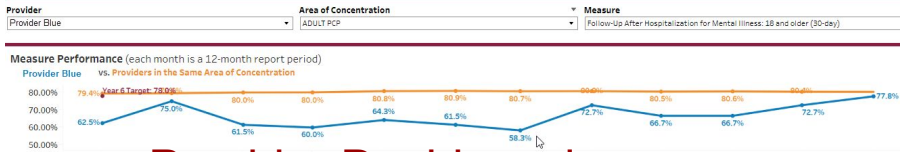
## \*Simulated data ARCS

FUH Measure: Impact assessment

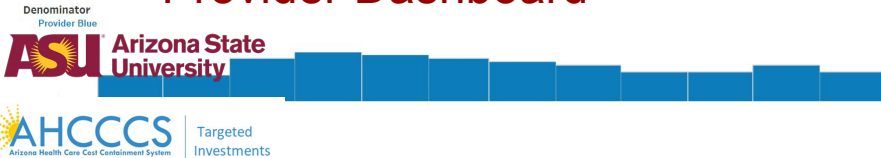


## TIPQIC Dashboard | Provider Blue

TIP QIC Targeted Investments Program  
Quality Improvement Collaborative



## Provider Dashboard



# Program Resources

AHCCCS Website (Milestones per Area of Concentration in the Announcements box)

<https://www.azahcccs.gov/PlansProviders/TargetedInvestments/>

TI 2.0 Application Requirements:

<https://www.azahcccs.gov/PlansProviders/TargetedInvestments/AppRequirements.html>

ASU TIPQIC Website:

<https://tipqic.org/about.html>

**Click on the Button Below to:**

**Subscribe to the  
TI Newsletter**



Thank You.

TI Program Email: [targetedinvestments@azahcccs.gov](mailto:targetedinvestments@azahcccs.gov)

# Open Discussion

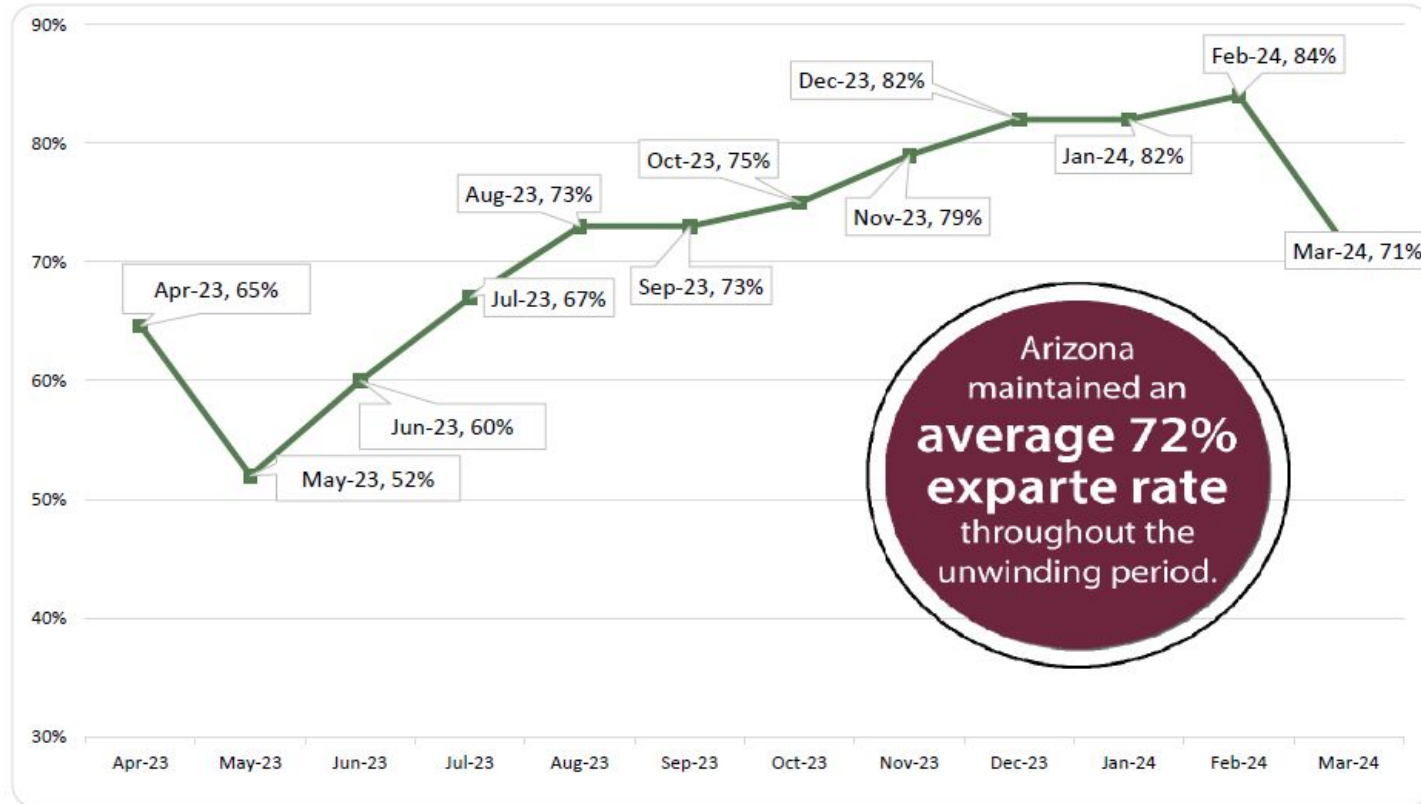


## Division of Member and Provider Services (DMPS) Call Center Data Updates

Patty Dennis, Assistant Director, Division of Member and Provider  
Services

# CMS Unwinding Feedback Letter Info from August 2023

Month	PI Call Center Operations Data		Unwinding Data Report Renewals Metrics	PI Application Determination Processing Time Data
	Average call center wait time	Average call abandonment rate	% of beneficiaries terminated for procedural reasons as a share of total beneficiaries due for renewal in the month	% of MAGI applications determinations processed in more than 45 days
May 2023	21	18%	27%	3%
June 2023	18	18%	22%	2%
July 2023	34	23%	17%	2%
August 2023	31	21%	12%	2%
September 2023	15	22%	14%	2%
October 2023	6	9%	10%	2%
November 2023	5	8%	8%	2%
December 2023	5	8%	7%	2%
January 2024	5	8%	5%	1%
February 2024	6	10%	5%	1%
March 2024	5	9%	13%	2%



# CMS Letter Efforts

- **4 Call Centers - AHCCCS, DES IVR, DES Valor, Unwinding Surge**
  - Drilled Down to Medicaid Specific Calls
- **Procedural Terminations**
  - CMS MOE Flexibilities - August/September 2023
  - ProActive Comms - June 2023
  - NCOA and Contexture Updates
- **MAGI Over 45 Days**
  - Monitor
  - Work with members

# Open Discussion



## Elderly and Physically Disabled (EPD) and Member Transition Updates

Jakenna Lebsock, Assistant Director, Division of Health Care Services (DHCS)



# Overview of ALTCS-EPD

- ALTCS-EPD is an AHCCCS Long Term Care program which delivers long-term, physical health, behavioral health and case management services as authorized by A.R.S. § 36-2931 et seq., to eligible members who are either elderly and/or have physical disabilities (EPD).

# Overview of ALTCS-EPD

- Responsibility to coordinate, manage, and provide integrated care for members in ALTCS, including:
  - Physical health, Long Term Services and Supports (LTSS), behavioral health, and case management services.
- Serve members who are elderly and/or have a physical disability including:
  - Adults with General Mental Health/Substance Use (GMH/SU) needs excluding members enrolled in other AHCCCS Medicaid programs (e.g., ALTCS-DD; ACC),
  - Adults with a Serious Mental Illness (SMI) designation excluding members enrolled in other AHCCCS Medicaid programs (e.g., ALTCS-DD; ACC-RBHA), and
  - Children, including those with special health care needs; excluding members enrolled in other AHCCCS Medicaid programs (e.g.,ALTCS-DD; ACC).

# Overview of ALTCS-EPD

- Long Term Services and Supports (LTSS)
  - Services and supports provided to members of all ages who have functional limitations and/or chronic illnesses that have the primary purpose of supporting the ability of the member to live or work in the setting of their choice, which may include the individual's home, a provider-owned or controlled residential setting, a nursing facility, or other institutional setting [[42 CFR 438.2](#)].

# ALTCS Eligibility

- ALTCS eligibility consists of two elements: **financial and medical**.
- Financial eligibility looks at gross income from all sources, resources (also known as assets), certain types of trusts, and transfers of resources.
- Income and resources have limits that cannot be exceeded.
  - Information is obtained through electronic sources, an interview with the applicant or other sources, and any documents that may be requested to make the financial determination.

# ALTCS Eligibility

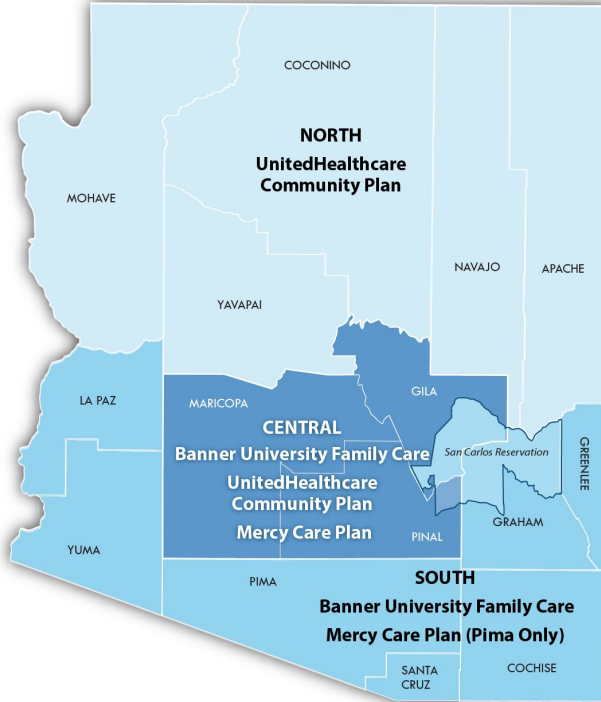
- The Pre-Admission Screening (PAS) tool is administered in an interview with the applicant and any caregivers. The tool consists of functional and medical questions.
  - *Note - Applicants who are receiving services through the Division of Developmental Disabilities (DDD) are assessed using the DD tool and those who are not eligible through DDD are assessed using the EPD tool.*
- If the applicant qualifies both financially and medically, they are approved.
  - If assessed as an EPD customer, they are enrolled with one of the ALTCS-EPD Health Plans, and
  - If assessed as a DD customer, they are enrolled with an ALTCS-DD Health Plan.

# ALTCS-EPD Procurement

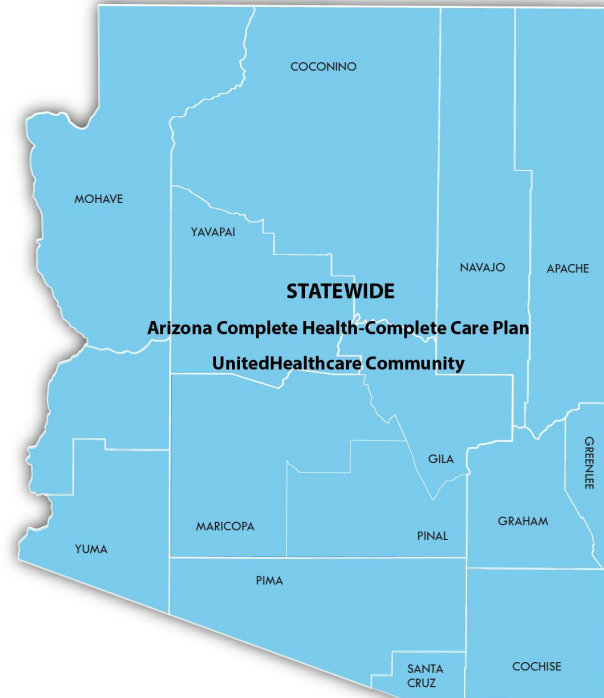
- State statute requires that AHCCCS issue a Request for Proposal and procure health care services for its members on a regular basis.
- AHCCCS conducted a new procurement for health plans to operate the ALTCS-EPD program as required under A.R.S. § 36-2939.
- The procurement was issued August 1, 2023 and awarded December 13, 2023.
- The ALTCS-EPD contracts were awarded contracts to begin service provision October 1, 2024.

# Geographic Maps of EPD Health Plans

**CURRENT**



**OCTOBER 2024**



# ALTCS-EPD Health Plan Readiness Information

- To ensure health plans are adequately prepared to meet the needs of the population served, and meet requirements and processes of the newly awarded contract, AHCCCS conducts a comprehensive series of activities to assess the health plans' readiness.
- Critical areas reviewed during readiness include:
  - Service delivery (e.g., case management; utilization review),
  - Provider network capacity,
  - Health care operations and administration,
  - Financial management,
  - Member and provider communication, and
  - Continuity of member care.



# ALTCS-EPD Member Transition Information

- AHCCCS will review each member's use of services in order to maintain continuity as much as possible.
- Members assigned by AHCCCS to a new health plan, will also be provided a choice of health plans.
- Additionally, health plans are required to continue services for a set period of time after the transition (depending on the service) regardless of network status of the provider. Detailed transition requirements are posted [in the Procurement requirements.](#)

# ALTCS-EPD Readiness and Transition Information

- A summary of the changes is available on the AHCCCS [website](#).
  - [ALTCS-EPD Contracts FAQs](#) are also available.
- Each awarded health plan has designated a transition coordinator who will serve as the main point of contact for network inquiries:
  - Arizona Complete Health-Long Term Care: [azchnetdevaltcs@azcompletehealth.com](mailto:azchnetdevaltcs@azcompletehealth.com)
  - UnitedHealthcare Community Plan: [Ishah\\_whipple@uhc.com](mailto:Ishah_whipple@uhc.com)
- More information regarding each health plan is available on the health plan website:
  - [UnitedHealthcare Community Plan: Provider directory lookup](#)
  - [Arizona Complete Health-Complete Care Plan: Provider directory lookup](#)

# ALTCS-EPD Readiness and Transition Information

- Presentations at Community and Workgroup Meetings

AHCCCS Community Presentations:	<a href="https://www.azahcccs.gov/AHCCCS/PublicNotices/CommunityPresentations.html">https://www.azahcccs.gov/AHCCCS/PublicNotices/CommunityPresentations.html</a>
AHCCCS MCO Update Meetings:	<a href="https://www.azahcccs.gov/PlansProviders/HealthPlans/meetingsevents.html">https://www.azahcccs.gov/PlansProviders/HealthPlans/meetingsevents.html</a>
AHCCCS Tribal Consultation:	<a href="https://www.azahcccs.gov/AmericanIndians/TribalConsultation/">https://www.azahcccs.gov/AmericanIndians/TribalConsultation/</a>

- General feedback or concerns regarding the EPD transition can be emailed to AHCCCS at: [MCOTransitions@azahcccs.gov](mailto:MCOTransitions@azahcccs.gov)

# Open Discussion

**Thank You ,  
Alex Demyan**



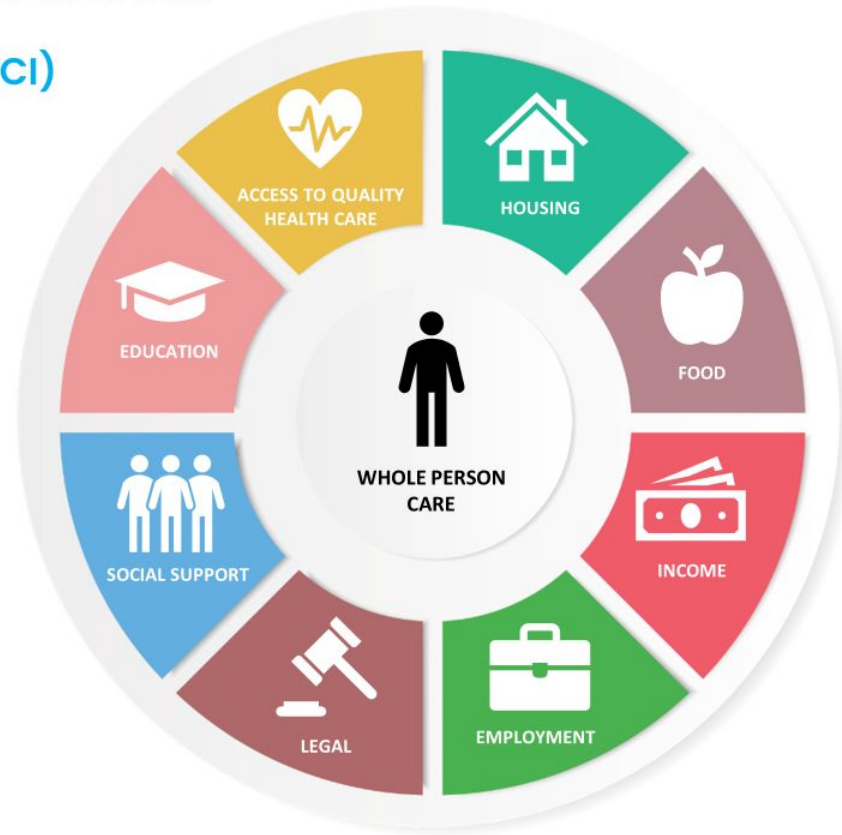
# Closed-Loop Referral Update

Kelly McGann, Director of Community Care  
Contexture

# CommunityCares Program Genesis

## AHCCCS Whole Person Care Initiative (WPCI)

- Officially launched the Whole Person Care Initiative in November 2019.
- Focused on role social risk factors play in influencing individual health outcomes.
- Exploring options for advancing WPCI through maximization of AHCCCS's current benefit package.



# CommunityCares

*Arizona's statewide, SDOH closed loop referral system operated by Contexture*



Single, statewide  
technology solution



Connects providers &  
organizations across  
sectors



Streamlines referral  
sending/receiving



Tracks outcomes



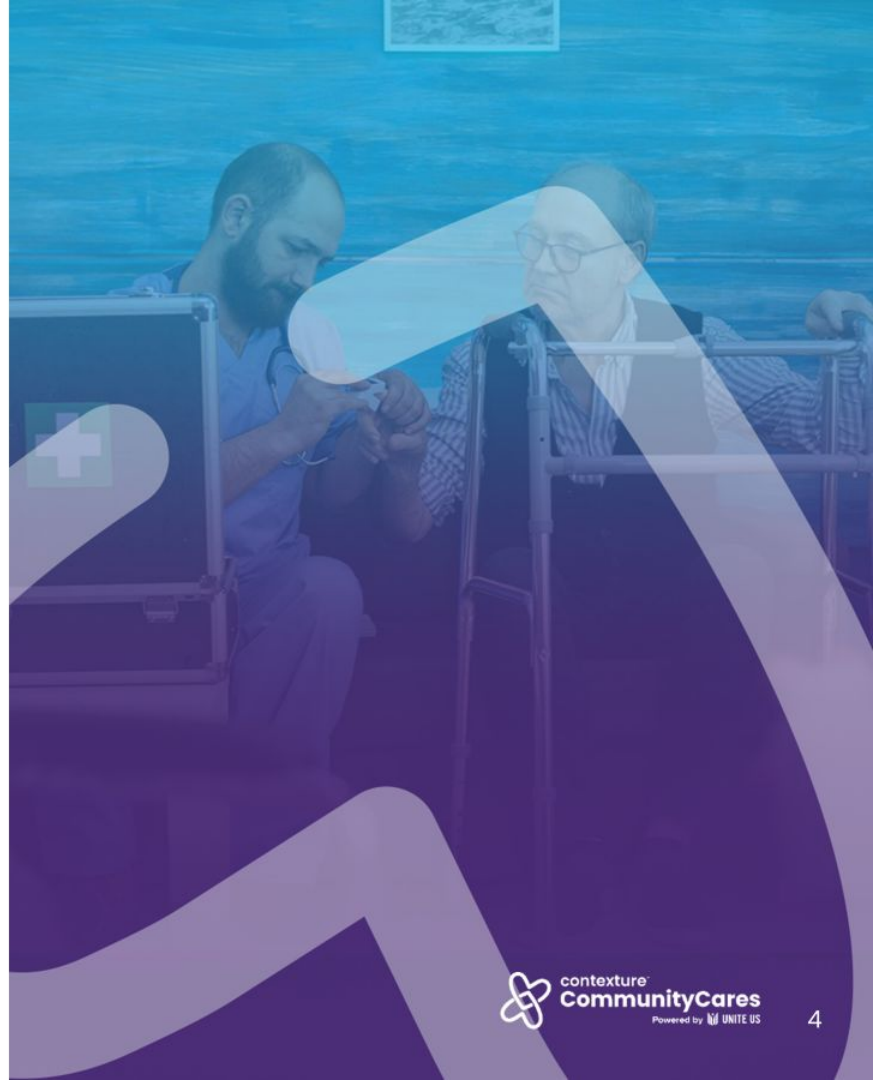
# CommunityCares Partners

- CommunityCares is a free program that enables the exchange of SDOH information between healthcare and community organizations



# CommunityCares Program Goals

- Coordinating Care
- Connecting Arizona communities
- Improving health outcomes with a whole-person care approach
- Leading with a data-driven approach



# CommunityCares Program Benefits

**Connects healthcare  
and community  
service providers.**

**Screenings and  
assessments.**

**Streamlines referral  
process across  
Arizona.**

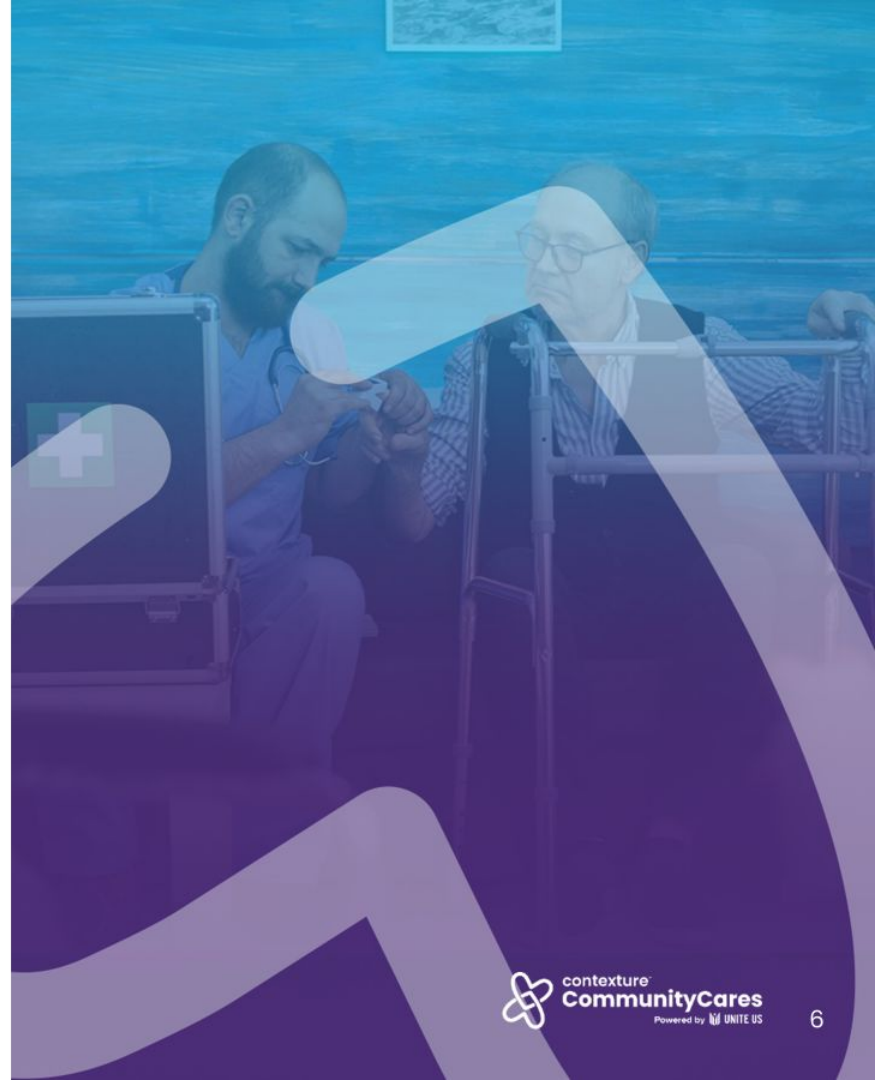
**Confirmation when  
social services are  
delivered.**

**Access to Solari 2-1-1  
resource directory.**

**Data tracking,  
analytics and  
outcome measures.**

# Program Incentives

- No fees to access or utilize the platform
  - plus incentives for adoption/utilization
- AHCCCS Differential Adjusted Payment (DAP) % financial incentives
- CBO Milestone Incentives (up to \$12k) and Assistance Funding (up to \$5k)

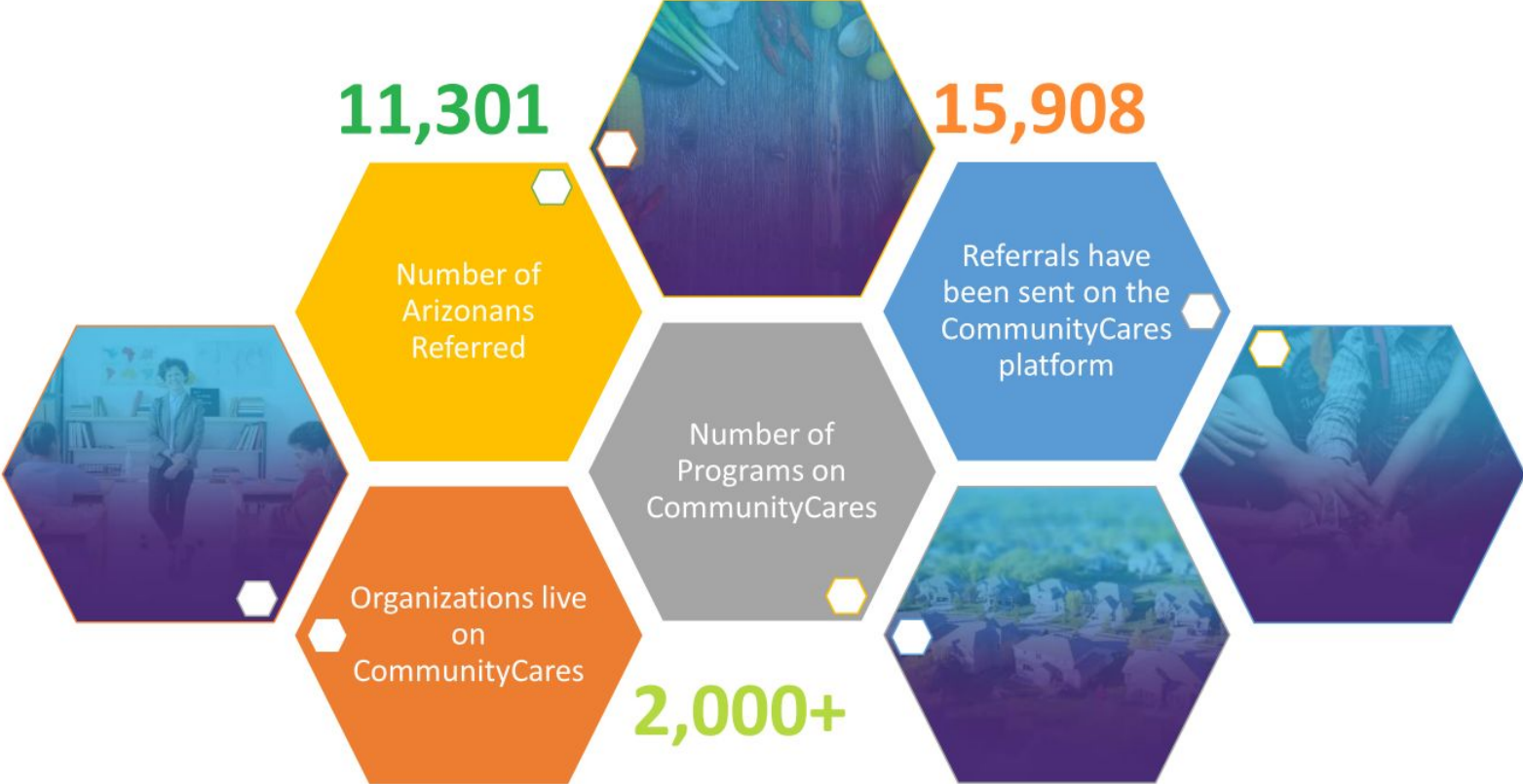


“ We are seeing more and more clients in need of practical resources along with their mental and physical health needs. I am thrilled to have a resource that will help us meet the needs of our clients. It is hard to do our work when the basic needs are not being met.”

## Women's Health Innovations of Arizona



# CommunityCares Achievements



Data as of March, 5 2024

\*site level

# CommunityCares Impact

*Targeting significant growth in participants and utilization going into 2024*


- Ramped up onboarding and utilization since January 2023
  - Live with 1,000+ organizations offering 2,000+ programs
  - Over 4,000 referrals in February, trending upwards
- Reducing barriers to adoption
  - Streamline and increase CBO incentive and assistance programs
  - Target food banks and housing related CBOs for onboarding
  - Feedback: CBOs need ongoing resources / support once onboarded

Tom Adams

 CONSENT ACCEPTED

DOB 10/12/1966 (Age 56) | TEL (718) 223-3444 | EMAIL ta@aol.com

ADDRESS Portland, OR | HOUSEHOLD 2

 Client requires actionREFER TOM 

Overview

Profile

Cases

Forms

Uploads

Referrals

## Tom Adams's Profile

## Contact Information

PHONE *home (primary, call)*  
(718) 223-3444ADDRESS *home*  
Portland, OR  
*county*  
Multnomah CountyEMAIL *(primary, message, notification)*  
ta@aol.com

PREFERRED METHOD OF CONTACT Call





INBOUND REFERRALS

- Needs Action 6
- In Review 2

ASSISTANCE REQUESTS

- Needs Action
- Closed
- Processed

INTERNAL CASES

- Open
- Closed
- All

OUTBOUND REFERRALS

- Drafts
- Rejected 8
- Recalled 36
- Needs Action
- In Review
- Closed
- All

EXTERNAL CASES

- Open
- Closed
- All

Care Coordinator ▼

Client Consent (All) ▼

Program ▼

1-6 of 6 ◀ ▶

Service Type ▼

SENDER	CLIENT NAME	SERVICE TYPE	DATE CREATED
Southern Regional Healthcare Provider	Olivia Ochoa	Emergency Food	Oct 27
CareOregon Metro Test Organization	Chelsea Dayton	Emergency Food	Oct 2
Oregon Housing - Demo	Morey Washington	Food Pantry	Oct 12
Oregon Housing - Demo	Tom Zinny	Food Pantry	Oct 12
Metro Health Clinic	Laura McGyver	Emergency Food	Sep 30
Unite All Dental Care	Carla Polson	Medically Tailored Meals	Sep 22

# Access to Social Care Data

- ✓ Export client-level data directly from the platform
- ✓ Access to Insights tableau dashboards to track your organizational activity
  - Network Activity dashboard – statewide & community level
  - Health Equity dashboard – understand demographics of clients served

## Network Activity Dashboard



## Health Equity Dashboard



# Highlighting Contexture's Success

## Network Growth

Contexture is currently the fastest growing state in terms of number of in-network programs. Specifically, AZ is #1 in active program growth quarter over quarter (QoQ) from launch through 2023 across all states.

## Network Activity

Since Contexture's launch in 2022, AZ experienced consistent QoQ growth in case volume, whereas with other states we sometimes see variability. Furthermore, AZ is in the Top 5 of states with the highest average growth in case volume QoQ from Contexture's launch through 2023.

## Social Needs Screening

AZ is in the Top 3 states for the highest average screening volume growth QoQ and in the Top 15 of states for total screening volume from Contexture's launch through 2023 across all states.

# Open Discussion



## SMAC Updates

Desiree Greene

Division Project Manager and SMAC Liaison

Division of Community Advocacy and Intergovernmental Relations

# SMAC Bylaws Subcommittee and Updates



Katie Hobbs, Governor  
Carmen Heredia, CEO

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## BYLAWS FOR THE A.H.C.C.C.S STATE MEDICAID ADVISORY COMMITTEE (SMAC)

### MISSION

The SMAC will participate in the development of policy and program administration for the Arizona Health Care Cost Containment System (AHCCCS). Participation will include review of policy, rules, and administrative issues for applicable AHCCCS programs. The SMAC will advise the AHCCCS Director on policy and administrative issues of concern to the SMAC member constituency.

To facilitate accomplishing its mission, the SMAC will, whenever practicable, recommend issues, and/or policies for inclusion on the SMAC agenda in order to allow for consideration prior to recommendation and possible implementation by the AHCCCS. SMAC membership may also request background information and/or policy papers in advance of SMAC meetings, allowing for a deliberative discussion of the issues with AHCCCS Senior Management during the SMAC meeting.

### AUTHORITY

The SMAC operates in accordance with 42 CFR 431.12 and the Arizona State Medicaid Plan.

### DEFINITIONS

"AHCCCS" or "Administration" means the Arizona Health Care Cost Containment System as defined in Arizona Revised Statutes (A.R.S.) §§ 36-2901, -2931, -2971 and -2981.

"SMAC" means the State Medicaid Advisory Committee, as appointed by the AHCCCS Director.

"AHCCCS Director" means the Director of AHCCCS as specified in A.R.S. §§ 36-2901, -2931, -2971 and -2981.

# New Ex-Officio SMAC Member Spotlight - Molly McCarthy

Molly McCarthy is the Deputy Director of Programs for the Arizona Department of Economic Security (DES). As Deputy Director, Molly leads programs and services that fall under the seven program divisions in the agency, including Developmental Disabilities, Benefits and Medical Eligibility, Employment and Rehabilitative Services, Aging and Adult Services, Child Support Services, Child Care, and Early Intervention.

Molly began her career with DES in 2011 and has held positions supporting multiple programs in Financial Services, Child Support Services, and Aging and Adult Services before taking on the role of Deputy Director.

Her track record of continuous improvement while working in collaboration with internal and external partners has built programs ready to support the growing populations served by DES. She has led efforts to modernize management systems, seize opportunities for automation, provide data transparency for public and internal management for data-driven decision-making, develop Academy-style training while integrating safety, and expand coordination with partners, while continuing to leverage client-centered feedback to drive meaningful change.

Molly received a Bachelor of Science in Business Administration – Finance from the University of Arizona and a law degree from the Saint Louis University School of Law. A third-generation Arizona native, she enjoys spending time with her husband and three young children.



# New SMAC Member Spotlight - Tory Roberg

Tory Roberg, currently serving as the Director of Government Affairs for the Alzheimer's Association Desert Southwest Chapter, began her career as a social worker in the child welfare system before transitioning to public policy. With a Masters in Public Administration, she held positions in the Governor's Office of Strategic Planning and Budgeting, the Department of Real Estate, and as Founder and Director of Fortitude AZ. Through Fortitude AZ, Tory dedicated herself to empowering non-profit organizations, locally and nationally, to achieve policy goals by facilitating research, coalition building, advocacy, communications, organizing, event planning, and professional lobbying. In 2021, when her mother was diagnosed with dementia, Tory took a sabbatical to provide care. Motivated by this experience, she joined the Alzheimer's Association in 2022 as an in-house lobbyist, passionately advocating for patients and families affected by Alzheimer's and other dementias. Tory resides in Phoenix with her partner, two teenagers, eight cats, and one beloved axolotl.





# New SMAC Member Spotlight - Meghan McCabe

Meghan McCabe currently serves as the Vice President, Policy and Advocacy for the Arizona Hospital and Healthcare Association, where she oversees federal and state government affairs for the statewide hospital association. A native Arizonan, McCabe graduated from Barrett Honors College at Arizona State University with a Bachelor of Science degree in Biology and Society. She earned her Juris Doctor degree at the University of Washington. After law school, McCabe spent several years in Washington, DC, lobbying at a boutique government relations firm on behalf of universities and scientific societies. Following her time in the nation's capital, McCabe returned to her home state. She has worked in contract government affairs, as well as in-house for the Arizona Medical Association. Prior to her current role, she served as the Director of Government Relations for AzHHA.



**THANK  
YOU!**

**David  
Voepel**

# SMAC Member Nomination Review

The SMAC receives many nominations for consideration throughout the year. The SMAC Liaison saves and prepares them for submission to the subcommittee in accordance with the bylaws. The subcommittee makes recommendations to CEO Heredia for her consideration to use those nominees to move forward with a formal majority vote of the SMAC during an open meeting. The SMAC membership is limited to those positions identified on our website, located here: <https://www.azahcccs.gov/AHCCCS/HealthcareAdvocacy/smac.html>. If you are interested, or know someone who would be a great fit for SMAC, please see the blank nomination form on the SMAC webpage. Please submit that nomination form and any other supporting materials to the following inbox: [dcaircommunityaffairs@azahcccs.gov](mailto:dcaircommunityaffairs@azahcccs.gov).

# Open Discussion



# Call to the Public

# 2024 SMAC Meeting Calendar

Per bylaws language, SMAC meetings are to be held during the 2<sup>nd</sup>  
Wednesday of  
January, April, July and October from 1:00 p.m. - 3:00 p.m

## 2024 SMAC Meetings:

January 10, 2024

April 10, 2024

July 10, 2024

October 9, 2024 (final meeting of the year)

For all SMAC Dates and Meeting Materials, see the following link:  
<https://www.azahcccs.gov/AHCCCS/HealthcareAdvocacy/smac.html>

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Handle:

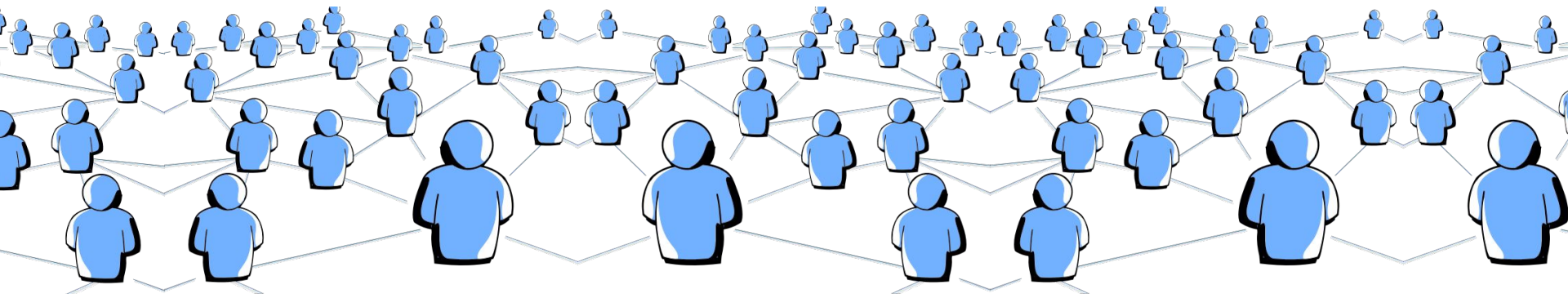
[@AHCCCSGov](https://www.instagram.com/AHCCCSGov)

Handle:

[@AHCCCS](https://www.linkedin.com/company/AHCCCS)

Channel:

[AHCCCSgov](https://www.youtube.com/channel/AHCCCSgov)





# Learn about AHCCCS' Medicaid Program on YouTube!



Watch our Playlist:

[Meet Arizona's Innovative Medicaid Program](#)

# Other Resources - Quick Links

- AHCCCS [Waiver](#)
- AHCCCS [State Plan](#)
- AHCCCS [Grants](#)
- AHCCCS [Whole Person Care Initiative \(WPCI\)](#)
- AHCCCS [Office of Human Rights](#)
- AHCCCS [Office of Individual and Family Affairs](#)
- [RBHA Competitive Contract Expansion](#)

Thank You.

Have a great day!