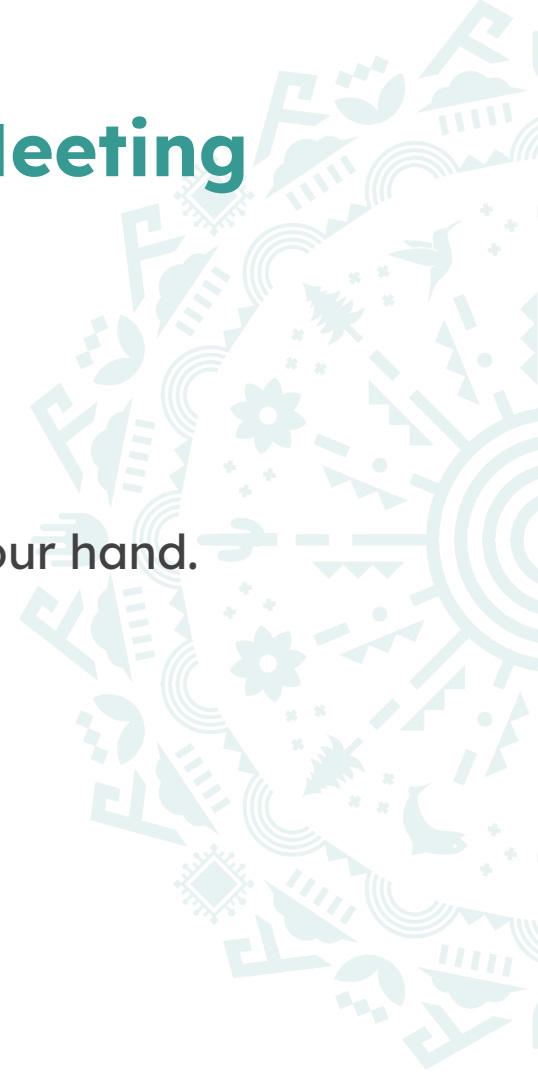


Welcome to the SMAC Quarterly Meeting

- While you are waiting test your audio.
- You were automatically muted upon entry.
- Please only join by phone or computer.
- Please use the chat feature for questions or raise your hand.

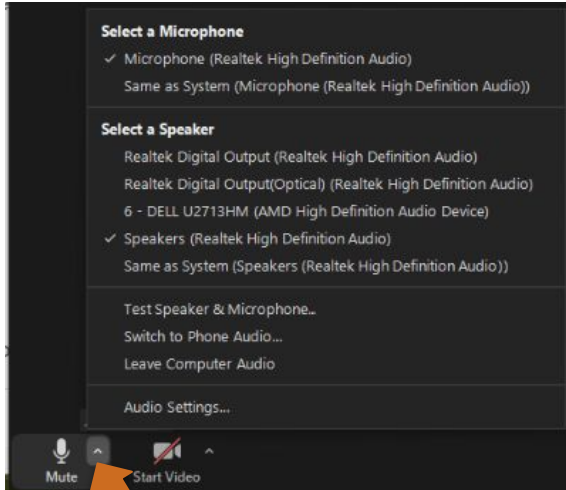
Thank you!



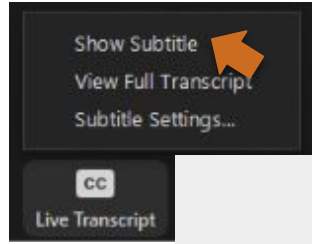
Zoom Webinar Controls

Navigating your bar on the bottom...

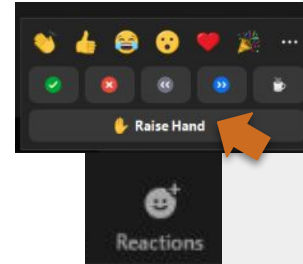
Audio Settings



Turn on Closed Captioning



Raise Hand



Chat

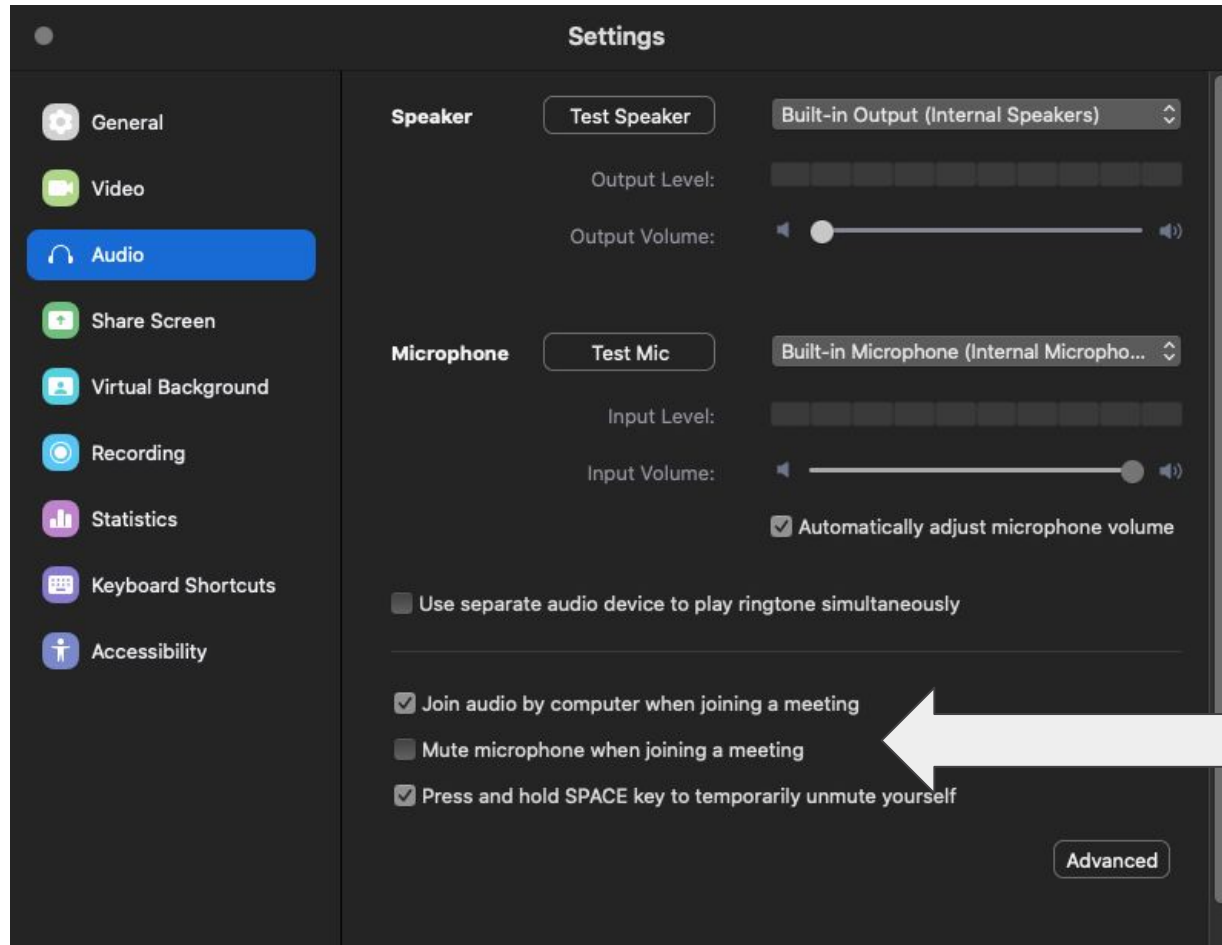


KEYBOARD SHORTCUTS TO RAISE HAND

Windows: Alt+Y to raise or lower your hand

Mac: Option+Y to raise or lower your hand

Audio Settings



The image shows the Zoom application settings window, specifically the Audio settings page. The left sidebar contains various settings categories: General, Video, Audio (highlighted in blue), Share Screen, Virtual Background, Recording, Statistics, Keyboard Shortcuts, and Accessibility. The main content area is titled 'Settings' and is divided into two sections: 'Speaker' and 'Microphone'. The 'Speaker' section includes a 'Test Speaker' button, a dropdown menu set to '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 set to '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 three 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 large 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 area is an 'Advanced' button.

Settings

Speaker Test Speaker Built-in Output (Internal Speakers)

Output Level: [Progress Bar]

Output Volume: [Slider]

Microphone Test Mic Built-in Microphone (Internal Micropho...)

Input Level: [Progress Bar]

Input Volume: [Slider]

Automatically adjust microphone volume

Use separate audio device to play ringtone simultaneously

Join audio by computer when joining a meeting

Mute microphone when joining a meeting

Press and hold SPACE key to temporarily unmute yourself

Advanced

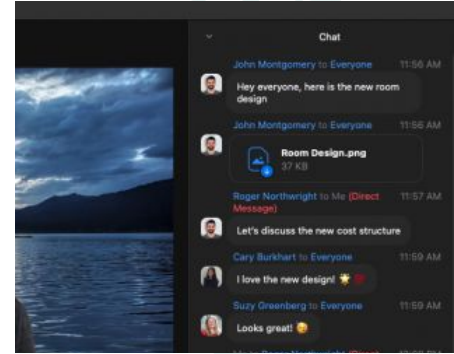
Webinar Tips



Mute your mic when you aren't speaking.



Limit background noise and distractions.



Use chat feature (or Q&A when available) 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.**





ARIZONA
HEALTH CARE COST
CONTAINMENT SYSTEM

State Medicaid Advisory Committee
(SMAC) Quarterly Meeting

January 8, 2025

AHCCCS Updates



Marcus Johnson
Deputy Director,
Community Engagement
& Regulatory Affairs

2025-2029 Strategic Plan

Access to Care

Advance Whole
Person Care



Lower the
Uninsured Rate



Maintain a Strong
Provider Network



ARIZONA
HEALTH CARE COST
CONTAINMENT SYSTEM
2025-2029
Strategic Plan

Quality of Care

Support
Preventive Care



Maintain High Member
Satisfaction

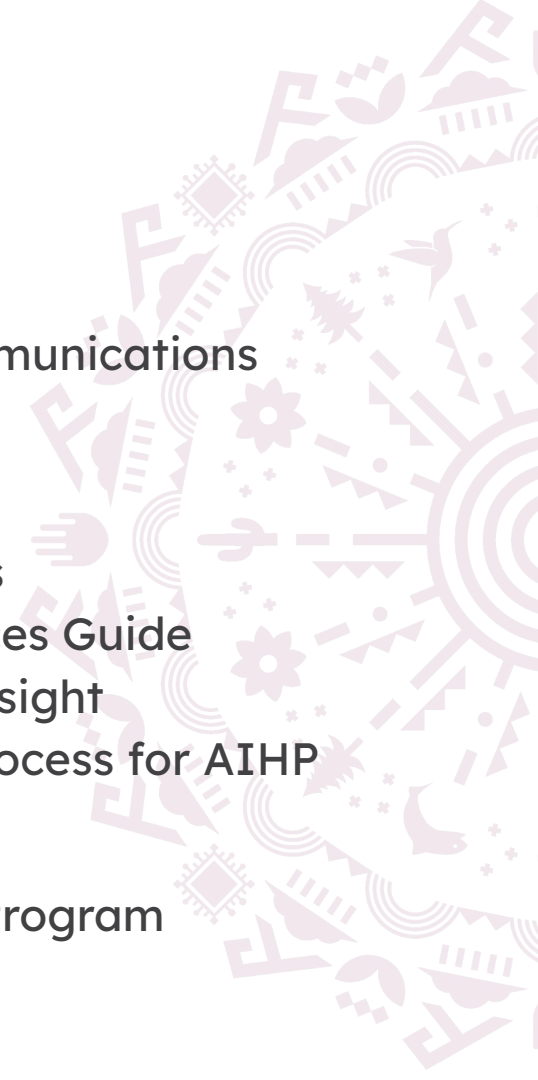


Strengthen Program
Integrity



Successes from 2024

- Unwinding from the Public Health Emergency
 - National Awards for technology and member communications
- Combating Fraud, Waste and Abuse
 - Reigning-in FFS spending
 - Suspending, terminating and excluding bad actors
 - Relaunching the Covered Behavioral Health Services Guide
 - Improved processes and technology for data oversight
 - Partnered with Tribes to establish a verification process for AIHP
- Housing as Health Care
 - Launched Housing & Health Opportunities (H2O) Program



Successes from 2024

- Supporting Maternal and Child Health
 - Launched coverage for doulas
 - Allocated \$2.5M to rural health centers to support maternity care
 - Launched coverage of the first FDA-approved medication for postpartum depression.
- Successful Federal Negotiations
 - CMS Approval to Cover Traditional Healing Services
 - CMS Approval to Cover Reentry Services
- Expanded Coverage for Children
 - Expanded Income Eligibility for KidsCare
 - 12-months continuous coverage for children

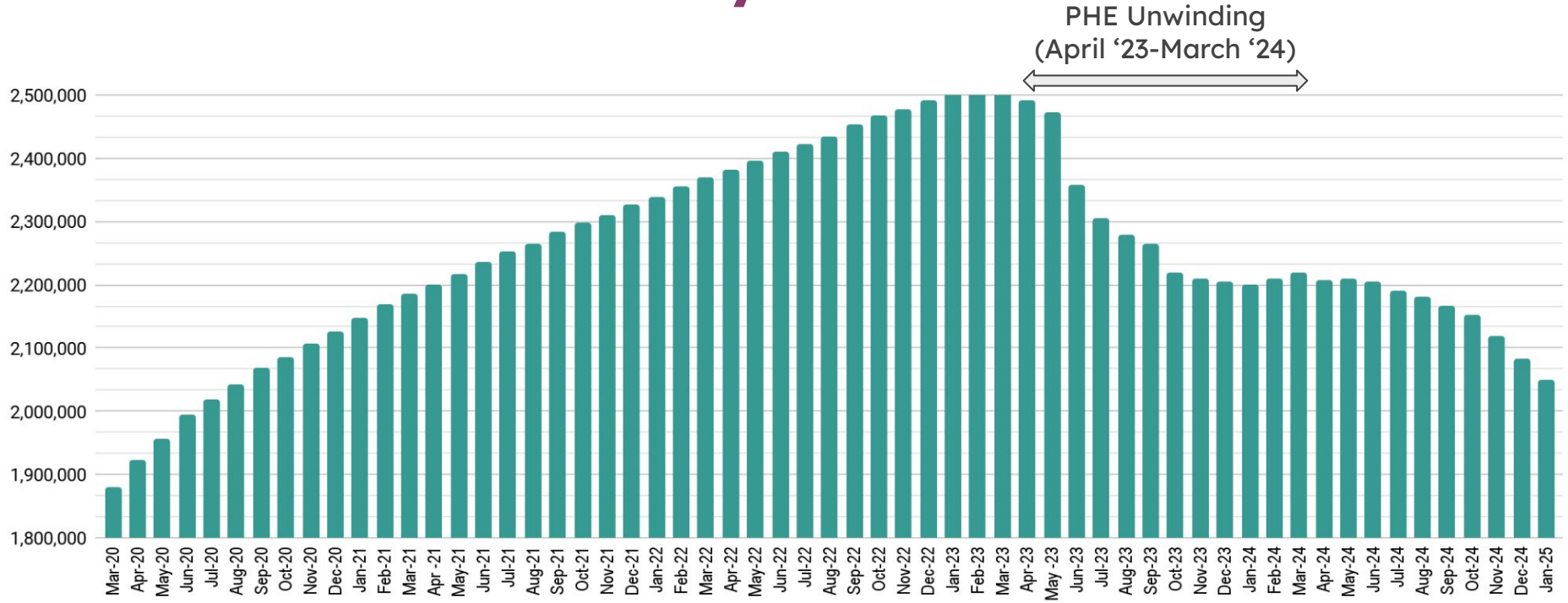


Successes from 2024

- Launched New Interactive Dashboards
 - Eligibility Outcomes
 - ED Visits
 - Inpatient Admissions
- Added New Provider Types
 - Community Health Worker Organizations
 - Doulas
- Navigated through the Change Healthcare cyber attack
- Launched rebranding campaign with sister Agencies
- Advanced tribal relations through more engagement w/Tribes



AHCCCS Population: March 2020 - January 2025



FWA Humanitarian Response

36,000+ Calls to 2-1-1 (press 7) Hotline

11,000+ Victims Directly Served

129 Requests for Out of State Transportation

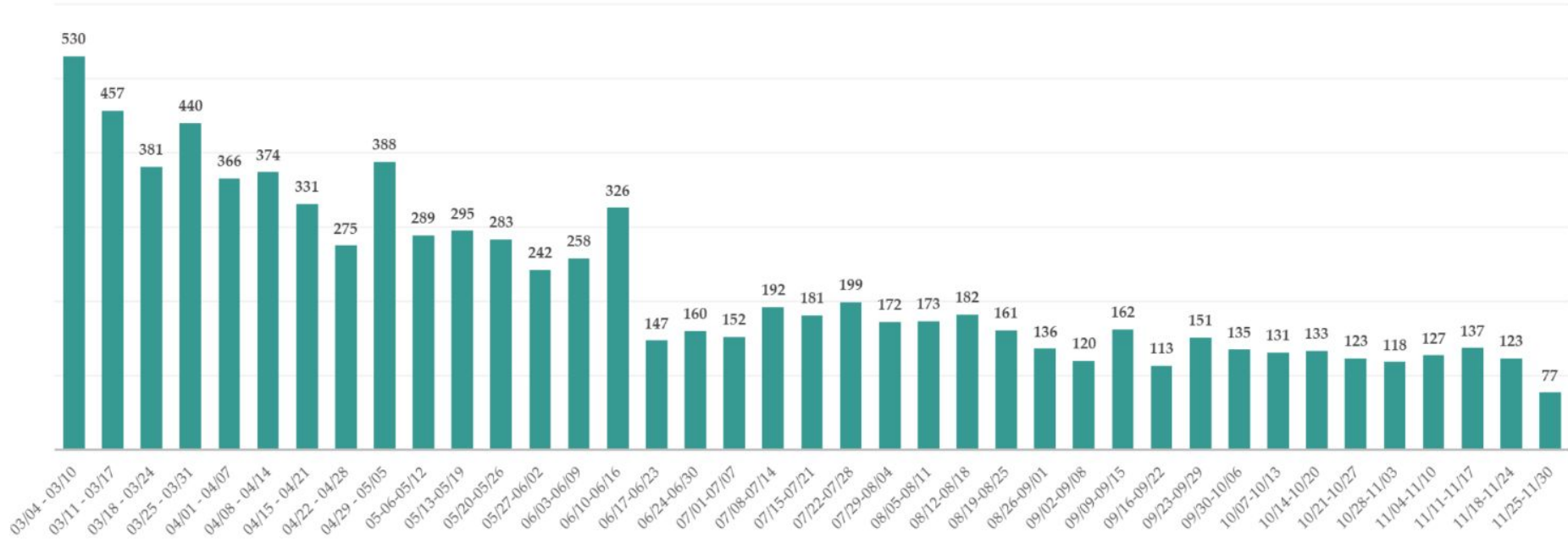
What's next?

- Moving from Crisis Response to Maintenance
 - 11/30/24 - Last day for lodging
 - 211(press 7) line extended through Jan. '25
 - 211 will continue to be a resource, post phasedown



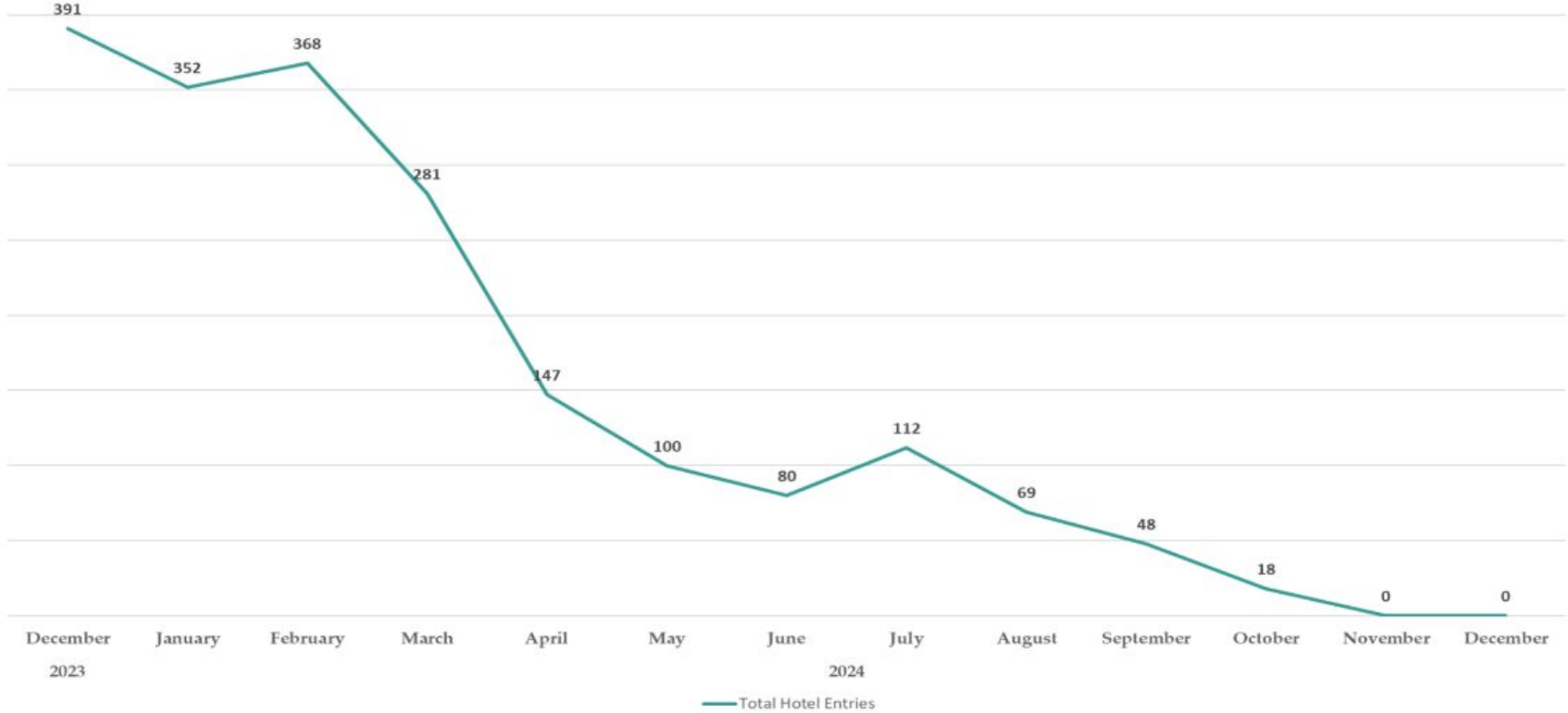
Number of Calls to Solari by Week

Cumulative Calls by Week (03-04-2024 thru 11-30-2024)



Total calls to Solari 36,081. Calls have been removed for ease of viewing.

Monthly Hotel Entry Utilization



www.azahcccs.gov/SoberLivingFraud

Web page includes:

- Year in Review Document
- One-Page Information Sheets
- Fact Sheet
- Newsroom
- Outreach Information
- Resources for Members & Providers



On the Horizon

- 2024 Legislative Session
 - Director's Confirmation
 - Traditional Healing Approval
- Preparing for new Federal Administration
- CMS Negotiations Continuing
 - Reentry waiver implementation planning
 - Former foster youth (YATI) continuous eligibility
- Traditional Healing Implementation Planning
- MES Roadmap
 - MES = Medicaid Enterprise System (30 yrs old!)
 - System Integrator currently being installed
- Consolidated Appropriations Act (CAA) Implementation: healthcare services for incarcerated youth
- CMS Final Rule on Access to Care
- Continued system improvements to combat fraud and member exploitation
 - Pre/Post Payment review system in development



Open Discussion

Federal Relations Updates



Shreya Arakere
Federal Relations Chief,
Division of Public Policy
and Strategic Planning



Kyle Sawyer
Assistant Director, Division of Public
Policy and Strategic Planning



Maxwell Seifer
State Plan Manager and Health Policy
Consultant, Division of Public Policy and
Strategic Planning

AHCCCS Federal Policy Overview

AHCCCS' Federal Relations team maintains the two federal policy documents which govern Medicaid and CHIP in Arizona:

1. **State Plan:** A 900+ page document describing various components of AHCCCS (e.g. member eligibility, available services, payment rates) permissible under federal law.
2. **1115 Waiver:** A document which grants us flexibility to design Demonstration projects that promote the objectives of the Medicaid program not otherwise authorized under federal law.

Changes to AHCCCS Federal Policy

Changes to AHCCCS Federal Policy occur through:

1. State Plan Amendments (SPAs): SPAs may be used to alter the State Plan within the framework of federal law and are typically approved within 90-days.
2. 1115 Amendment Requests may be submitted to pilot new and innovative projects. They have longer negotiation timelines and are typically approved for 5 year periods that can be renewed.

1115 Waiver Updates

Reentry Services Overview

- On December 27, 2024, CMS granted approval to provide limited coverage for services furnished to a subset of incarcerated individuals for up to 90 days immediately prior to their expected dates of release.
- This approval also provides expenditure authority to the state to provide non-medical transportation (NMT) to and from health-related social needs (HRSN) services and home and community-based services (HCBS) for Arizona Long Term Care System (ALTCs) eligible beneficiaries.

1115 Waiver Updates

Reentry Services (Cont'd)

- Demonstration Initiative Goals
 - Increase coverage, continuity of coverage, and appropriate service uptake
 - Improve access to services
 - Improve coordination and communication
 - Increase additional investments in health care and related services
 - Improve connections between carceral settings and community services
 - Reduce all-cause deaths and reduce number of ED visits and inpatient hospitalizations
 - Provide intervention for certain behavioral health conditions

1115 Waiver Updates

Reentry Services (Cont'd)

- Eligibility
 - To qualify for services covered under this demonstration approval, individuals residing in a correctional facility must have been determined eligible for Medicaid or the Children's Health Insurance Program (CHIP) (or be eligible for CHIP except for their incarceration status) pursuant to an application filed before or during incarceration, and have an expected release date within 90 days.
 - For a Medicaid covered individual entering a correctional facility, Arizona will not terminate Medicaid coverage, but will suspend the individual's coverage.

1115 Waiver Updates

Reentry Services (Cont'd)

- Participating Facilities
 - Jails
 - Prisons
 - Youth Correctional Facilities
 - Tribal Correctional Facilities



1115 Waiver Updates

Reentry Services (Cont'd)

- Covered Services
 - Case Management
 - Medication Assisted Treatment (MAT) Services
 - 30-day Supply of Prescription Medications
 - Practitioner Office Visit
 - Peer Support Services



1115 Waiver Updates

Reentry Services (Cont'd)

- Next Steps
 - AHCCCS will establish a timeline for implementation with a proposed effective go-live date of October 1, 2026.
 - AHCCCS will begin the demonstration with prison facilities administered by the Arizona Department of Corrections Rehabilitation and Reentry (ADCRR), these facilities will make up the first phase of the program.

Upcoming 1115 Waiver Amendments

Former Foster Youth (FFY) Coverage

- On December 3, 2024, AHCCCS submitted a waiver request to extend full Medicaid coverage to FFY who turned 18 on or before 12/31/22 and were enrolled in Medicaid when they aged out of foster care.
- Extend eligibility for full Medicaid state plan benefits to FFY who are under age 26, who turned 18 on or before December 31, 2022, who were in foster care under the responsibility of another state or tribe on the date of attaining 18 years of age, were enrolled in Medicaid on the date of aging out of foster care, and are now applying for Medicaid in Arizona.
- More details can be found on <https://www.azahcccs.gov/YATIWaiverRequest>

State Plan Amendment (SPA) Updates

Consolidated Appropriations Act (CAA 2023)

As part of the Consolidated Appropriations Act, 2023, section 5121 adds requirements for a certain set of services for Medicaid and CHIP juvenile beneficiaries who are incarcerated. This includes:

- A Medicaid eligible individual who is under 21 years of age, and individuals between the ages of 18 and 26 who is eligible for Medicaid under the former foster care children group.

State Plan Amendment (SPA) Updates

Consolidated Appropriations Act (CAA 2023) cont.

- Under section 5121, state Medicaid and CHIP programs are required to offer the following:
 - Screening and diagnostic services: In the 30-days prior to release, or within one week or as soon as practicable after release, juveniles must receive screening and diagnostic services (including behavioral health screenings) in accordance with EPSDT requirements.
 - Targeted Case Management: In the 30-days prior to release and for at least 30-days following release

State Plan Amendment (SPA) Updates

Consolidated Appropriations Act (CAA 2023) cont.

- States are required to have in place an internal operational plan detailing how the State will reach compliance by 1/1/25.
- This internal operational plan will be partnered with a SPA holding a 1/1/25 effective date. The SPA will:
 - Attest to meeting the above requirements
 - Authorize coverage of Targeted Case Management for this population

State Plan Amendment (SPA) Updates

- Vaccine Administration Fee SPA
 - Effective 12/15/2024, this SPA will change the following:
 - Pharmacy Vaccine Administration Fee to be increased from \$4.10 to \$14.00
 - Pharmacy COVID Administration Fee to be decreased from \$40.57 to \$14.00
- Multi-Specialty Interdisciplinary Clinic (MSIC) Rates
 - Effective 1/1/2025, MSIC rates will be increased by 5%.
- Nursing Facility Rates
 - Effective 1/1/2025, this SPA changes nursing facility reimbursement methodology including but not limited to an increase in per diem rates 0.61% for Statewide, 0.65% for Flagstaff, and 1.14% for Tucson.

Exception to the “Four Walls” Requirement

- On November 1, 2024, CMS finalized the “Medicare Outpatient Prospective Payment Final Rule” (CMS 1809-FC)
- Historically, Medicaid Clinic Services were required to be provided within the physical “four walls” of the clinic.
- This rule includes new mandatory and optional exceptions to allow for Medicaid coverage of clinic services outside of the “four walls”
 - Mandatory exception for IHS and Tribal Clinics,
 - Optional exceptions for behavioral health clinics, and
 - Optional exceptions for services provided by personnel of clinics that are located in rural areas.
- This rule will permanently extend the existing grace period that was issued during the PHE.

Change in Federal Administration

- Trump Administration set to return to office on January 20, 2025
 - Ronald F. Kennedy Jr. selected* to lead Health and Human Services
 - Dr. Mehmet Oz selected* to lead Centers for Medicare & Medicaid Services
- It's largely uncertain what changes may come to Medicaid. Key topics we are closely monitoring include:
 - Potential new Waiver priorities such as Medicaid work requirements
 - Potential changes to 2024 CMS final rules (Access Rule, Staffing Rule)
 - Potential changes to Medicaid Financing

*Pending Senate Confirmation

Public Comments

Public Comments or Written Testimony may be submitted to AHCCCS via:

Email: publicinput@azahcccs.gov and waiverpublicinput@azahcccs.gov

Postal Mail

AHCCCS

Attn: OOD-Division of Public Policy and Strategic Planning

801 E. Jefferson St., MD 4200 Phoenix, AZ 85034

Opportunities for public comment are posted at the following links:

- SPAs: <https://www.azahcccs.gov/AHCCCS/PublicNotices/#SPAs>
- 1115 Waivers: <https://www.azahcccs.gov/Resources/Federal/PendingWaivers/>



Open Discussion

Olmstead Plan Updates



Adam Robson
Employment Administrator,
Division of Health Care Services

Olmstead v. L.C. (1999)

- The story of the Olmstead case began with two women, Lois Curtis and Elaine Wilson.
- Both had diagnoses of mental health conditions and intellectual disabilities.
- Both voluntarily admitted to the psychiatric unit in the State-run Georgia Regional Hospital.
- Following the women's medical treatment there, mental health professionals stated that each was ready to move to a community-based program.
- Both remained confined in the institution, each for several years after the initial treatment was concluded.
- Both filed suit under the Americans with Disabilities Act (ADA) for release from the hospital.



Olmstead v. L.C. (1999)

- States are required to provide community-based services for individuals with disabilities who would otherwise be entitled to institutional services:
 - State's treatment professionals reasonably determine that such placement is appropriate
 - The affected person is in agreement with the decision, and
 - The placement can be reasonably recommended, taking into account the resources available to the State and the needs of others who are receiving State-supported disabilities services

Arizona's Approach

- The Court did not require states to develop a plan, but Arizona chose to do so.
- The population targeted to benefit from the Olmstead Plan are all individuals who may be at risk of institutionalization, including individuals with behavioral health needs and members of the ALTCS program, including Tribal ALTCS programs.



Olmstead Strategies

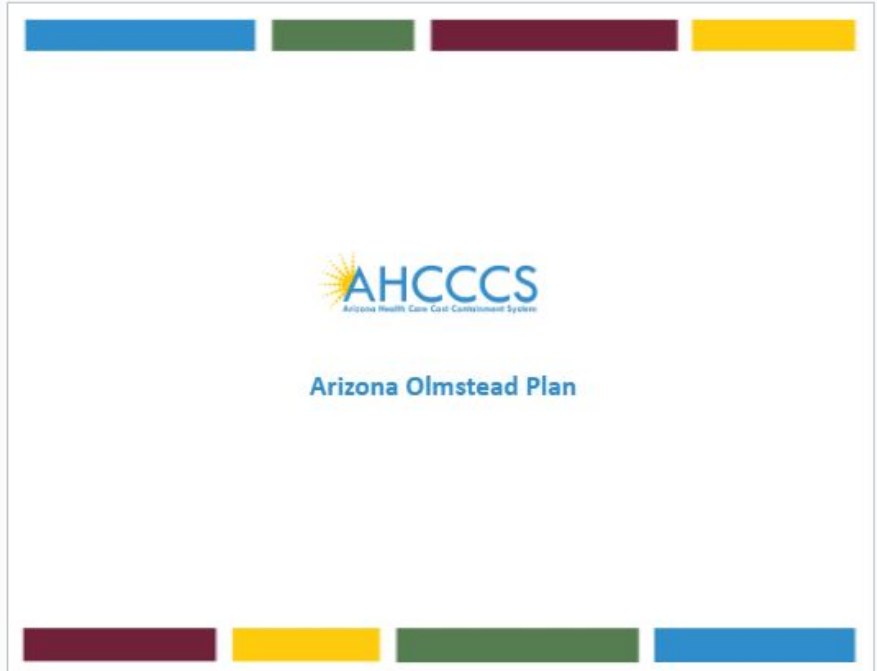
#	Strategy	Description
1	Effective Permanent Supportive Housing (PSH) for members to successfully reside in the community	Increase housing choice and opportunities for individuals and ensure necessary support services are available to assist members to obtain and maintain the least restrictive, most integrated community setting possible.
2	Reach-in discharge planning for hospital settings	Increase the ease of access for care coordination and discharge planning for members in hospital settings, while reducing outpatient service barriers.
3	Reach-in discharge planning for the justice system	Improve discharge planning, reach-in care coordination, and service delivery for members exiting the justice system.
4	Expansion of Home and Community-Based Services (HCBS) for aging individuals with Serious Mental Illness (SMI) determinations	Explore the feasibility of expanding HCBS for the aging SMI population.

Olmstead Strategies

#	Strategy	Description
5	Workforce Development initiatives	Implement programs and systems that will enhance the capacity, capability, and commitment of the healthcare workforce.
6	High quality network to ensure members are served in the most effective and least restrictive manner	Ensure services are provided by high quality network providers in a timely manner.
7	Person-centered planning enhancements	Improve monitoring with service and treatment planning standards for Managed Care Organizations (MCOs).
8	Aggregated Population Data	Identify and monitor data to provide a systemic level review of members transitioning to least restrictive settings.

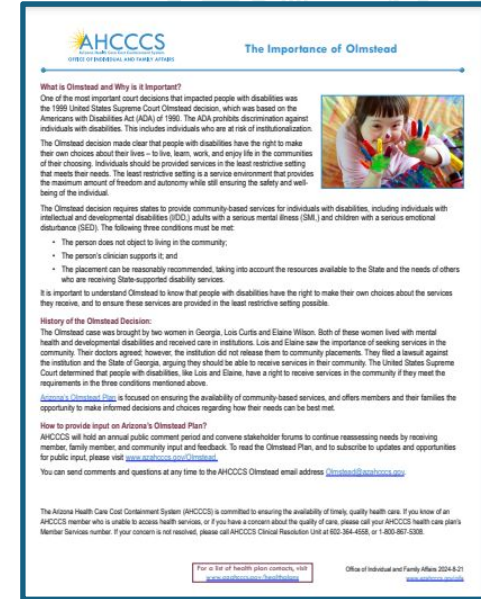
Where Are We Now?

- The current Arizona Olmstead Plan launched on 10/13/2023.
- There have been 3 quarterly updates to the Olmstead Plan (2 posted).



What's New?

- Orientation training video
- Olmstead 1-pager



Both can be found at: <https://www.azahcccs.gov/olmstead>

Notable Olmstead Plan Updates Since Implementation on 10/13/2023

Strategy	Objective or Performance Target in Reference	Update
Strategy 1: Housing Objective 1.B	Transition and update ACOM 448 to AMPM 1710 and educate impacted MCOs.	The AMPM 1710 update is completed and available online.
Strategy 1: Housing Objective 1.B	Develop standardized training around evidenced based practices related to Permanent Supportive Housing.	Trending towards completion in January 2025, AHCCCS is developing a PSH learning track that will be added in RELIAS and assigned to any provider identified as being a provider of PSH services.

Notable Olmstead Plan Updates Since Implementation on 10/13/2023

Strategy	Objective or Performance Target in Reference	Update
Strategy 1: Housing Objective 1.C	Establish baseline data on current utilization of existing housing support and wrap-around services to determine how services are being utilized to meet members' housing needs and to strategize opportunities for improvement.	Established a streamlined process for reporting members within the AHP who are connected to clinical support. As of September 2024, there are 2,187 members currently enrolled in the AHP, of which 93.5% are active in receiving wrap-around services with their health home.
Strategy 1: Housing Objective 3.A	Increase the number of providers who provide PSH following fidelity from the Substance Abuse and Mental Health Services Administration (SAMHSA).	AHCCCS awarded a MHBG through ARPA to AzCH in the North and South to provide infrastructure support to onboard new PSH providers. AzCH has contracted with two new PSH providers through the award and expanded PSH services to new counties.

Notable Olmstead Plan Updates Since Implementation on 10/13/2023

Strategy	Objective or Performance Target in Reference	Update
Strategy 2: Reach-In/Hospital Objective 1.A	Increase usage of Child and Adolescent Level of Care Utilization System (CALOCUS) as standardized assessment tools used by the Provider network to determine service level needs across all MCOs.	As of September 30, 2024, there are 101 providers that have CALOCUS portal accounts, which is a 5.2% increase from the previous quarter (96) and a 9.7% increase from when first reported in April 2024 (92).
Strategy 2: Reach-In/Hospital Objective 2.A	30% of participating hospitals/inpatient providers will be facilitating at least 10 member referrals (on average) per month using CommunityCares (Closed-Loop Referral System).	AHCCCS offered a Differential Adjusted Payment (DAP) Program to incentivize providers in using the CLRS. All providers participating in the DAP are now enrolled to use the system and have committed to performing at least 10 referrals per month using the system.

Notable Olmstead Plan Updates Since Implementation on 10/13/2023

Strategy	Objective or Performance Target in Reference	Update
Strategy 3: Reach-In/Justice Objective 1	Develop relationships with counties/ justice settings currently not participating in data sharing with AHCCCS to support enrollment suspense.	Since June 2023, there have been five (5) new counties participating in data sharing with AHCCCS to support enrollment suspense, totaling nine (9) counties in all.
Strategy 3: Reach-In/Justice Objective 3	Develop a discharge planning process which ensures inmates obtain medically necessary Durable Medical Equipment (DME) immediately upon release.	After further research, AHCCCS has concluded that there are no systemic barriers related to members receiving DME upon release from justice settings. Individual cases are being addressed by the respective MCO Justice Liaisons.

Notable Olmstead Plan Updates Since Implementation on 10/13/2023

Strategy	Objective or Performance Target in Reference	Update
Strategy 3: Reach-In/Justice Objective 4.D	Review and update contract, policy, and/or other guidance document changes to enhance MCO oversight and compliance with care coordination and discharge.	As of 10/1/2024, AHCCCS has updated the justice contracts and policy to include a new justice-related deliverable (AMPM 1022, Attachment B), which will enhance MCO oversight and care coordination outcomes for justice-involved members.
Strategy 3: Reach-In/Justice Objective 5.A	Outline the types of justice settings that could benefit from participating in the CLRS and establish prioritization of implementing statewide, starting with at least one pilot site location.	The Arizona Department of Corrections, Rehabilitation and Reentry (ADCRR) has begun actively using the CLRS daily. Also, Maricopa County Corrections is working on their onboarding plan for the pilot sites that will be using the system.

Notable Olmstead Plan Updates Since Implementation on 10/13/2023

Strategy	Objective or Performance Target in Reference	Update
Strategy 5: WFD Objective 1.B	Expand the scope and depth of the current training and development programs available to both behavioral health and long-term care direct care personnel by establishing a statewide partnership between AHCCCS and the public community colleges throughout Arizona	Three (3) trainings have been completed and added to the RELIAS Behavioral Health Library. <ul style="list-style-type: none">• Initial BH in-service case management.• Advanced in-service case management.• Leadership and supervision. Three (3) other trainings have been submitted to AHCCCS and are under review. <ul style="list-style-type: none">• SAMHSA competencies for the Peer Recovery Support Specialist pre-service training.• DCW pre-service training and testing program.• DCW advanced in-service training.

Notable Olmstead Plan Updates Since Implementation on 10/13/2023

Strategy	Objective or Performance Target in Reference	Update
Strategy 5: WFD Objective 1.C	Create and implement an interactive Caregiver Career Pathway (CCP) planning tool into the Pipeline AZ platform for prospective health care staff to explore Arizona health care jobs, including their eligibility requirements, and map the career ladders and frameworks connected to actual job openings.	As of 10/2024 (+/- from previous quarter) <ul style="list-style-type: none">• 3,545 current jobs posted (- 536)• 690 AHCCCS Providers that have been onboarded (+143).• 6,284 users that are students and/or job seekers (+1,381).• Over 13K Post-Secondary students are currently studying a Major related to Healthcare on the platform.

Notable Olmstead Plan Updates Since Implementation on 10/13/2023

Strategy	Objective or Performance Target in Reference	Update
Strategy 6: Network Objective 3.A	MCOs to implement at least one Center of Excellence for children at risk of/with Autism Spectrum Disorder (ASD).	As of January 2024, 100% of MCOs have at least one contracted provider with a Center of Excellence for children at risk of/with ASD.
Strategy 6: Network Objective 3.D	Purchase and implement training for use of the Early Childhood Service Intensity Instrument (ECSII), to allow for assessment of children birth through five.	Completed ECSII tests have gone from 252 in October 2023 to 404 as of the contract end date of March 14, 2024, resulting in a 60% increase. AHCCCS has worked with the American Academy of Child and Adolescent Psychiatry (AACAP) to establish essential elements of fidelity criteria (scoring, care planning).

Notable Olmstead Plan Updates Since Implementation on 10/13/2023

Strategy	Objective or Performance Target in Reference	Update
Strategy 6: Network Objective 3.C	Increase and enhance the network of available service providers across all levels of care who are certified, or have completed specific coursework or training, in service provision to children and adolescents with complex behavioral health needs and co-occurring disorders, including those at risk/with ASD.	Through a financial incentive offered by DDD, as of August 2024, training completions are as follows: <ul style="list-style-type: none">• 93 behavioral health providers have enrolled one or more staff members in the 13-course training plan.• 3,585 behavioral health provider staff have completed one or more of the courses.• 25,622 total courses in the training plan have been completed.• 2,261 individuals have completed the live virtual instructor-led course.

Notable Olmstead Plan Updates Since Implementation on 10/13/2023

Strategy	Objective or Performance Target in Reference	Update
Strategy 6: Network Objective 3.C	Increase and enhance the network of available service providers across all levels of care who are certified, or have completed specific coursework or training, in service provision to children and adolescents with complex behavioral health needs and co-occurring disorders, including those at risk/with ASD.	<p>Through a contract with the National Center of START Services (NCSS), a number of training sessions were completed.</p> <p>Summary of overall training sessions: Between 11/2023 and 9/2024, NCSS provided I/DD-MH training and T/A to over 480 Arizona professionals. The two highest utilized training offerings were the IDD-MH Professional Development Course for Care Coordinators with 282 registrants and the Trauma-Informed Care Technical Assistance (TA) Series with 108 registrants. Satisfaction ratings across training activities were above the 90th percentile.</p>

Notable Olmstead Plan Updates Since Implementation on 10/13/2023

Strategy	Objective or Performance Target in Reference	Update
<p>Strategy 7: Person-centered planning enhancements</p> <p>Objective 1</p>	<p>MCOs and the Tribal ALTCS Programs to maintain 86% compliance in ensuring the PCSP process and documentation include the following:</p> <ul style="list-style-type: none"> • Member choice of services and providers. • Member needs and progress towards personal goals and desired outcomes. • Verification that PCSPs were reviewed with members/ guardians and revised at least annually. • Services, including the type, scope, amount, duration, and frequency specified in the PCSPs, as well as verification of service delivery. 	<p>AHCCCS has received all quarterly reports from the ALTCS MCOs to capture data necessary to determine compliance and will continue to work with the MCOs to remain compliant with the established threshold. For Tribal ALTCS, AHCCCS updated the audit tool and provided training to the Tribal ALTCS Programs in July 2024. In October 2024, all eight Tribal ALTCS programs submitted their quarter report using the updated deliverable that included the federally mandated requirements, which is in process of being reviewed.</p>

Notable Olmstead Plan Updates Since Implementation on 10/13/2023

Strategy	Objective or Performance Target in Reference	Update
Strategy 8: Aggregated Population Data Objective 1.A	Annually obtain data related to the following elements to identify trends and future direction: <ul style="list-style-type: none">• Demographic data,• Enrollment numbers by geographic service area and health plan,• Average cost per person by geographic service area and health plan,• Average cost per person by service type and eligibility (e.g., home-based services), and• Average length-of-stay and readmission rates	AHCCCS is working with a consultant to assist in developing a preliminary framework and data pulling to conduct a baseline analysis. Once finalized, data reports will be shared publicly.

How to Stay Connected With Olmstead

- Visit www.azahcccs.gov/Olmstead. Here, interested parties have the option to:
 - Subscribe to updates to receive the latest news regarding the Olmstead Plan,
 - Receive information about open public comment periods, and
 - Locate the Olmstead email address to share input with AHCCCS at any time.
- Review quarterly updates in the Olmstead Plan. Find out when these updates occur by subscribing to updates via the Olmstead web page.

Other Ways to Stay Connected With Olmstead

- Quarterly updates presented during AHCCCS Community Forums on accomplishments made during the quarter.
- Annual updates presented to various committees and councils, such as the SMAC, Tribal Consultation, BHPC, ALTCS Advisory Council, and the OIFA Advisory Council.
- MCOs to review and share quarterly updates on the Olmstead Plan with their Member Advisory Councils and Governance Committees.
- Annual Olmstead Plan public forum and comment period to conduct a reassessment of needs.

*** Input and feedback on the Olmstead Plan may be provided during any of the above events or sent separately via the Olmstead email address (Olmstead@azahcccs.gov) throughout the year.



Open Discussion

SMAC Updates



Desiree Greene
Division Project Manager
and SMAC Liaison,
Division of Public Policy and
Strategic Planning

Current Public SMAC Members

Terry Benelli, Executive Director, Local Initiatives Support Corporation

Open Seat - Matt Jewett, Director of Health Policy, Children's Action Alliance

Vince Torres, Community Member/Advocate

Dina Norwood, Managing Attorney, Community Legal Services

Jill Anne Castle, Professor/Advocate/Consultant, Arizona State University

Diana "Dede" Yazzie Devine, Community Member/Advocate

Melissa Kotrys, CEO, Contexture

Tory Roberg, Director of Government Affairs, Alzheimer's Association, Desert Southwest Chapter

Serena Unrein, Community Member/Advocate

Kavita Bernstein, Senior Director of Strategy & Innovation, Candelen



Thank You

Matt Jewett

Current Provider SMAC Members

John Hogeboom, CEO/President, Community Bridges, Inc.

Dr. Aaron Knudson, Internal Medicine and Pediatric Hospitalist, Banner Page Hospital

Dr. Elizabeth McKenna, M.D., Co-Owner, Healing Hearts Pediatrics

Dr. Jessica B. Peterkin, Dentist & Founder/CEO, Ministry of Dentistry, Inc

Vicki Staples, Director of OP Behavioral Health, Valleywise Health

Mary Jo Whitfield, VP of Integrated Health, Jewish Family and Children's Services

Jennifer Longdon, Chief External Affairs Officer, AZ Alliance for Community Health Centers

Karen Resseguie, Behavioral Health Administrator, Foundation for Senior Living

Katherine Andersen, Director of Health Information Management and Medical Staff; Privacy Officer, San Carlos Apache Healthcare Corporation

Brittney Kaufmann, Chief Executive Officer, Health System Alliance of Arizona

New SMAC Member Spotlight - Jennifer Longdon

Jennifer Longdon serves as the Chief External Affairs Officer at the Arizona Alliance for Community Health Centers. She is responsible for building, maintaining, and growing relationships with government agencies, policymakers, media, and other external partners to increase awareness of and support for health centers and their vital work to serve the needs of Arizona communities. Paralyzed in a 2004 shooting, she has a history of focused legislative efforts on disability advocacy and gun violence prevention including three terms as an Arizona State Representative. She made history by becoming the first Democrat in 60 years to chair the Committee on Abuse and Neglect of Vulnerable Adults in Long Term Care Facilities"



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 Director 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.
- We have a new open seat for a Provider. For the Oct meeting, we will be voting in a new Public SMAC member. The cut-off date for nominations and supporting materials is by 3 pm Wednesday, February 19th.



Open Discussion



Call to the Public

2025 SMAC Meeting Calendar

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

2025 SMAC Meetings:

January 8, 2025

April 9, 2025

July 9, 2025

October 8, 2025 (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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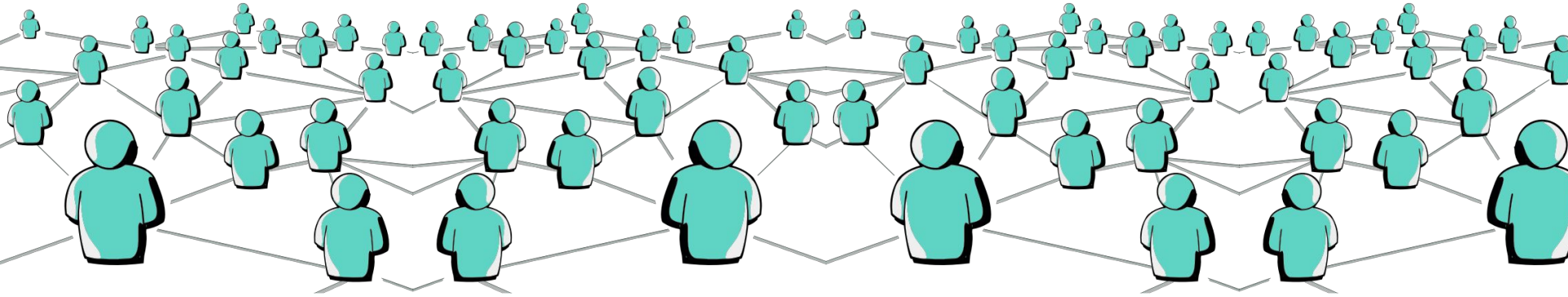
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Learn about AHCCCS' Medicaid Program on YouTube!

AHCCCS
Explains...

Medicaid Eligibility

AHCCCS
Explains...

ALTCS

AHCCCS
Explains...

Health-e-Arizona Plus



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](#)
- [ALTCS](#) Email: mcotransitions@azahcccs.gov FAQ:
chrome-extension://efaidnbnmnnibpcajpcglclefindmkaj/https://www.azahcccs.gov/Resources/Downloads/ALTCSEPD/ALTCS-EPD_FAQ.pdf





Thank you!
Have a great day!