

Welcome to the SMAC Quarterly Meeting

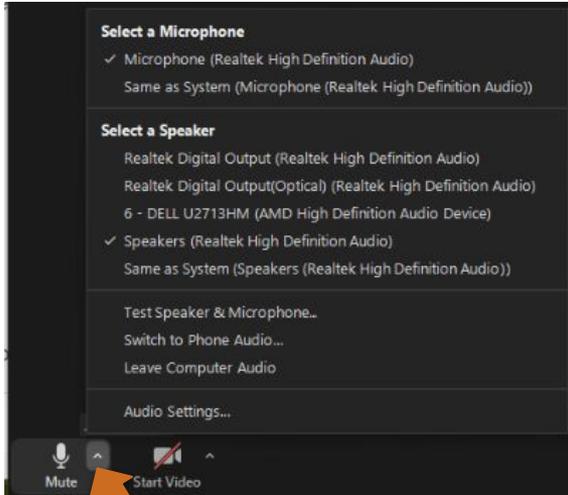
- While you are waiting test your audio.
- You were automatically muted upon entry.
- Please only join by phone or computer.
- Please use the chat feature for questions, or comments or raise your hand.

Thank you!

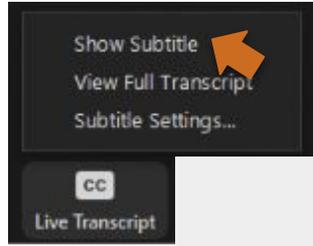
Zoom Webinar Controls

Navigating your bar on the bottom...

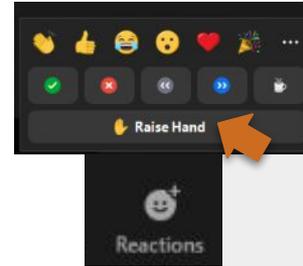
Audio Settings



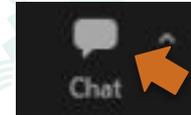
Turn on Closed Captioning



Raise Hand



Chat

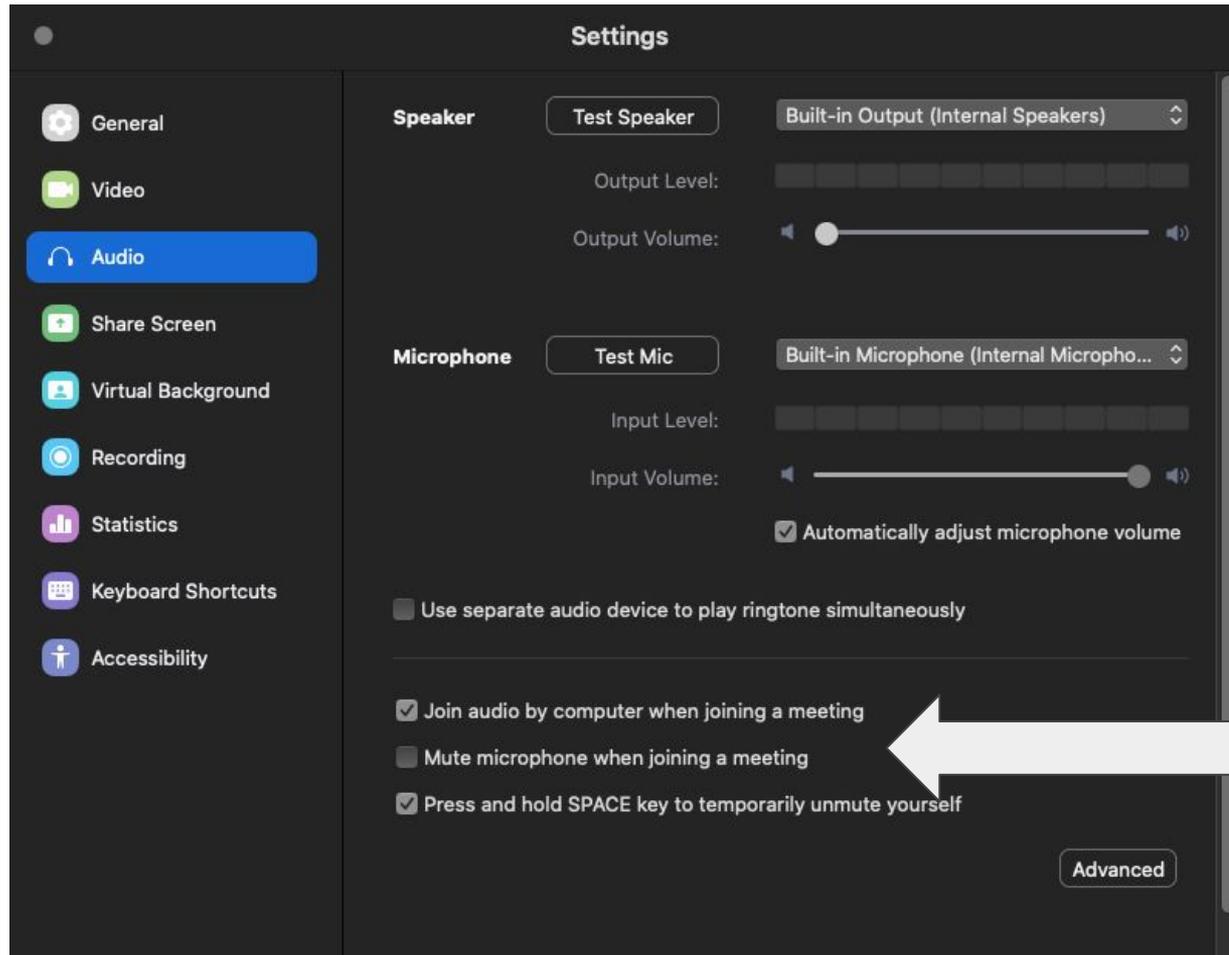


KEYBOARD SHORTCUTS TO RAISE HAND

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 section. 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 'Speaker' and 'Microphone' sections. 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 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 screen 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

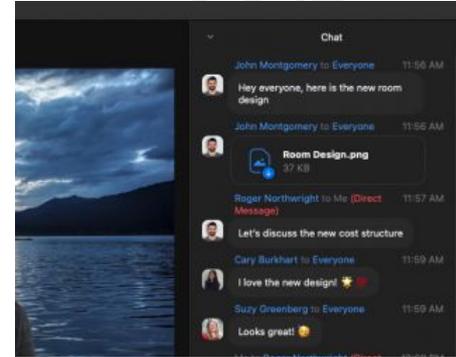
Webinar Tips



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

April 9, 2025

AHCCCS Updates

Carmen Heredia
AHCCCS Director



Today's Agenda

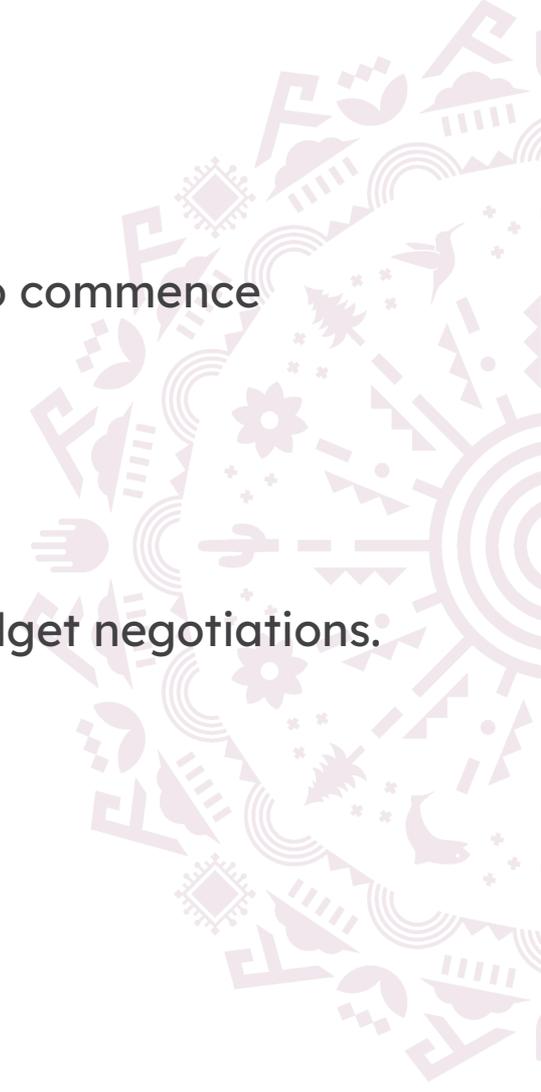
- Director's Updates
- SMAC Member Spotlight Updates
- Federal Relations Updates
- Division of Member and Provider Services Updates
- Office of the Inspector General Updates
- SMAC Updates and Voting Session
- Call to the the Public
- Adjourn

Recent Federal Developments

- Federal reforms being debated. To date, no structural changes at the state level.
- Federal Grants Cancellation - ARPA Mental Health, Substance Abuse, and Community Health Worker Grants
 - ~\$50M impact
- [AHCCCS Insights: New Data Reports to Inform Decision-Making](#) - Intended to help inform stakeholders and policymakers as Medicaid changes are being contemplated
 - Enrollment and Spend by County - Released 3/28/24
 - Enrollment and Spend by Congressional District - In Development

Recent State Developments

- Standing Committees have ended, budget negotiations to commence
- Director Nomination - hearing to be scheduled
- SB1671 - Traditional healing services
 - Senate Third Read- PASSED 18-9-3
 - Not heard in House Approps- will likely be part of budget negotiations.
- DDD Supplemental Need
 - HB 2816- Clean Supplemental Bill
 - HB 2945 - development disabilities appropriations
 - Governor's listening session



GOVERNOR
Katie Hobbs

AHCCCS LEADERSHIP TEAM

SENIOR LEADERSHIP TEAM

DIRECTOR
Carmen Heredia

DEPUTY DIRECTOR
Kristen Challacombe

DEPUTY DIRECTOR
Marcus Johnson

ASSISTANT DEPUTY DIRECTOR & MHC
Alisa Randall

ASSISTANT DEPUTY DIRECTOR
Lynne Emmons

CHIEF MEDICAL OFFICER
Dr. Theresa Costales

BUSINESS OPERATIONS

CLINICAL & MCO OPERATIONS

FEE-FOR-SERVICE PROGRAMS

PROGRAM INTEGRITY & DATA

COMMUNITY AND REG. AFFAIRS

MEDICAL SERVICES

ASSISTANT DIRECTOR DBF & CFO
Joshua Worley (acting)
Jeffery Tegen

ASSISTANT DIRECTOR ISD & CIO
Marna Richmond (acting)

ASSISTANT DIRECTOR DMPS
Patty Dennis

ASSISTANT DIRECTOR OGC & GC
Gina Relkin

ASSISTANT DIRECTOR HRD & CHRO
Sky Mills

CHIEF COMPLIANCE OFFICER
Katie Morris

ASSISTANT DIRECTOR DMC
Christina Quast

ASSISTANT DIRECTOR DBHH
C.J. Loisel

ADMINISTRATOR OIFA
Susan Kennard

ASSISTANT DIRECTOR DFSM
VACANT

ASSIST. DIRECTOR OIG & INSPECTOR GENERAL
Vanessa Templeman

EXEC. BUS CONSULTANT ANALYTICS
Maureen Sharp

ASSISTANT DIRECTOR DPPSP
Kyle Sawyer

COMMUNITY ENGAGEMENT OFFICER
Vacant

CHIEF COMMUNICATIONS OFFICER
Havona Horsefield

DENTAL PROGRAM
Dr. Michael Recuber

PHARMACY PROGRAM
Suzi Berman

MEDICAL DIRECTOR
Dr. Anna Morenz

MEDICAL DIRECTOR
Dr. Eli Shinnar

MEDICAL DIRECTOR
Dr. Roger Wilcox

DEPUTY MEDICAL DIRECTOR
Dr. Kiran Raman

BUSINESS OPS MANAGER
Jeanette Datcher

(DBF) Division of Business & Finance
(DBHH) Division of Behavioral Health & Housing
(DFSM) Division of Fee for Service Management
(DMC) Division of Managed Care
(DMPS) Division of Member & Provider Services
(DPPSP) Division of Public Policy & Strategic Planning

(HRD) Human Resources & Development
(ISD) Information Services Division
(OGC) Office of the General Counsel
(OOD) Office of the Director
(OIFA) Office of Individual & Family Affairs
(OIG) Office of the Inspector General

EXECUTIVE ASSISTANT
Julie Longley

EXECUTIVE ASSISTANT
Tiffany Burris

EXECUTIVE ASSISTANT
Brooke Brunell

BUSINESS OPS MANAGER
Maria Ayala

⚠ Alert: Unauthorized Agent and Broker Activity on ACA Marketplace

The Health Insurance Marketplace is seeing an increase in suspicious activity by some agents and brokers selling Marketplace coverage. This may include signing you up for coverage without your knowledge or switching you out of a plan you already have and into a new one.



Agents and Brokers are individuals and organizations that help enroll consumers in coverage and also get payments from insurance plans.



What you need to know to protect yourself

- Agents and brokers **must get your permission** when signing you up or making changes to your insurance plan.
- Health insurance ads on social media or elsewhere that offer you cash, gifts, or other perks, could be a scam. Don't give out personal information that might be used without your consent.
- Use trusted, official sources to find legitimate help comparing and enrolling in Marketplace insurance. Go to "find local help" on HealthCare.gov or call the Marketplace Call Center at 1-800-318-2596 to find help in your area.



What to do if you suspect changes were made on your account

- You may discover a potential problem with your coverage when you get mail or a call, or visit the doctor and try to use your insurance.
- If you believe you were enrolled in or switched to a plan without your knowledge, call the Marketplace Call Center at 1-800-318-2596 (TTY: 1-855-889-4325) so our official Marketplace representatives can resolve any coverage issues. Wait times are low and a representative will be able to help answer your questions.



How the Marketplace can help

If the Marketplace representatives determine you have been enrolled or had your plan switched without your knowledge, our representatives can work with your insurer and the Internal Revenue Service (IRS) to:

- Make sure the unauthorized plan is cancelled
- Make sure you're reenrolled in a plan that you choose
- Have inaccurate costs repaid to you
- Get corrected tax forms

Health Insurance Marketplace
The program was developed by U.S. Congress and approved by the U.S. Department of Health & Human Services.



HealthCare.gov

Unauthorized Marketplace Enrollment

- This is a national issue and CMS is taking action against brokers/agents.
- Contact the Marketplace Call Center to drop the Marketplace plan, if desired.
 - 1.800.318.2596
- AHCCCS Clinical Resolution Unit (CRU) can assist with access to care issues.
 - 1.800.867.5808.
- Know the warning signs! No broker should be offering \$ or gifts to sign up for health insurance.
- AHCCCS to outreach to all members dual-enrolled in a commercial plan.

**For more information
visit...**

[THIS AHCCCS WEBPAGE](https://www.azahcccs.gov/Members/UnauthorizedMarketplaceEnrollment.html)

**[https://www.azahcccs.gov
/Members/UnauthorizedM
arketplaceEnrollment.html](https://www.azahcccs.gov/Members/UnauthorizedMarketplaceEnrollment.html)**

Notice: ACA Marketplace Fraud

What to
Watch for
to Protect
Your AHCCCS
Coverage



ARIZONA
HEALTH CARE COST
CONTAINMENT SYSTEM

On the Horizon

- CMS Negotiations Continuing

- Former foster youth continuous eligibility
- AHCCCS Works

- Continued system improvements to combat fraudulent billing and member exploitation

- Traditional Healing Legislative Approval and Implementation

- “CMS Final Rule”

- Two Justice Initiatives

- Consolidated Appropriations Act (CAA): healthcare services for incarcerated youth
- Reentry Waiver: Reimbursement for services 90 days pre-release

- MES Roadmap

- MES = Medicaid Enterprise System (30 yrs old!)
- Pre/Post Payment review system approved
- System Integrator currently being installed

SMAC Member Spotlights





Open Discussion



SMAC Member Spotlight Updates



Terry Benelli
Senior Executive Director
Local Initiatives Support
Corporation



Housing is Healthcare Fund

by the Arizona Medicaid Health Plans

What is the Fund

The Housing is Healthcare Fund by the Arizona Medicaid Health Plans invests in affordable housing projects that include elements that connect communities and support healthier individuals, families and economies across the State of Arizona, including housing for Medicaid-eligible individuals.



The Funders



Origins of the Fund

A Consortium of MCOs

The Fund was developed in 2020 by a consortium of health plans committed to contributing a portion of their reinvestment requirement to a pooled grant fund on an annual basis to address a shared priority—*the need for more affordable housing*.

With a Shared Goal

To increase the supply of affordable housing that includes elements that connect communities and support healthier individuals, families and economies across the State of Arizona, and shifting the housing market toward sustainable affordable housing solutions, including housing for Medicaid-eligible individuals.

In Partnership with LISC

Local Initiatives Support Corporation (LISC) Phoenix was asked to provide fund management, project sourcing, application design, underwriting, grant disbursement and evaluation.

Who LISC Is

LISC is one of the country's largest community development nonprofits, helping forge vibrant, resilient communities across America.

We work with residents and partners to close gaps in health, wealth, and opportunity so that people and places can thrive.



How LISC Works

We deliver **grants, loans, equity, and capacity-building support** to under-resourced communities. We help leverage these resources, making for even greater impact.



Housing is Healthcare Fund

Affordable Housing 2.0

Projects must demonstrate a deliberate connection to community assets and cross-sector partnerships demonstrated by genuine community engagement.



Addressing the Social Determinates of Health

Project Features

Healthy food retailers that accept food assistance programs like WIC and SNAP

LEED and Fitwel standards

Employment centers that match resident skills

Parks or community centers

Active transportation facilities and public transit

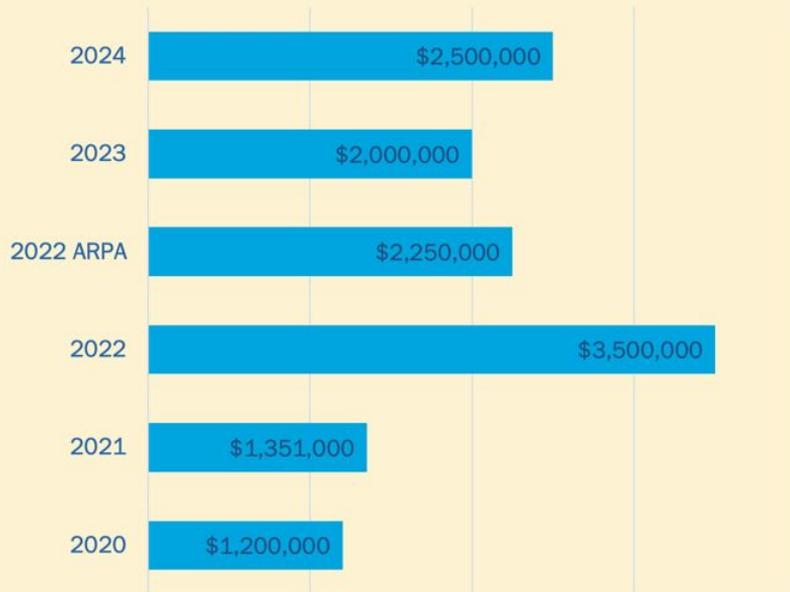
Medical facilities, such as federally qualified health centers

Schools, childcare or senior centers (where applicable)

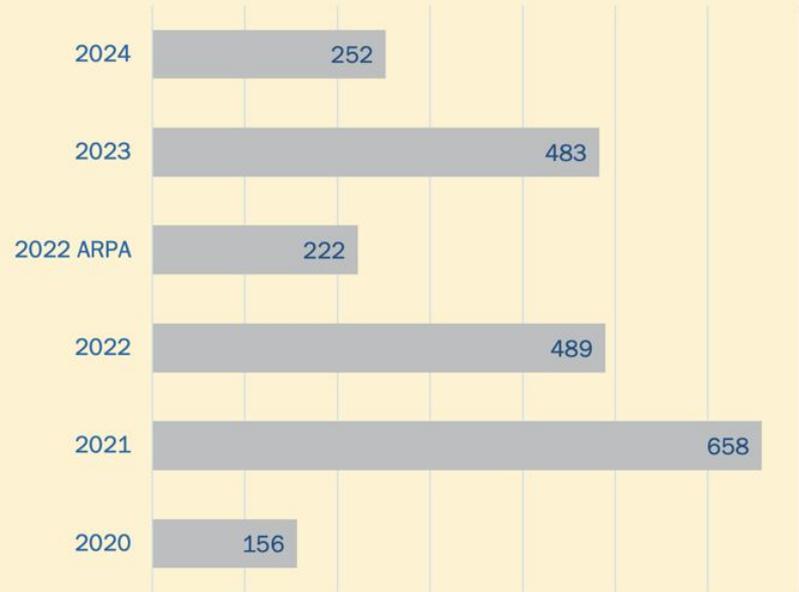
Public libraries

\$10.4 Million Granted Over 5 Years

Total Grant Dollars Awarded



Total Units Funded



2023 Grantee

Crown Motel

Flagstaff Shelter Services

- Flagstaff
- 58 units shelter

Funding History

\$500,000 Home Matters Arizona Fund grant

\$850,000 Leveraged

In 2022, Flagstaff Shelter Services purchased the Howard Johnson Motel on Route 66 in Flagstaff, AZ with federal funding through the Arizona Department of Housing to provide emergency housing to families. With the support of a grant through Home Matters Arizona Fund, Flagstaff Shelter Services converted the motel into 58 units of affordable housing for families and medically vulnerable people. These units address a critical need in Coconino County for affordable housing – more than 100 households are on a waitlist for one unit of permanent supportive housing – and align with the City of Flagstaff's 10-Year Housing Plan. The Crown Motel to housing project has already helped people transition into permanent housing. Of the 134 people who stayed at the Crown in its first year, 12% found permanent housing (source).



Status:

2023
Grantee

La Victoria Commons



Copa Health

- Tempe
- 104 units of Rental Family & PSH

Funding History

- \$160,000** HUD Capacity Building grants
- \$200,000** ACF Pre-development loan
- \$500,000** Home Matters Arizona Fund grant
- \$40,000** Metropolitan Phoenix Affordable Housing Collaborative grant
- \$30,260,074** NEF Equity
- \$40.7 million** Leveraged



Copa Health was selected as the developer for City of Tempe owned lots along the Valley Metro Rail. The 104-unit affordable housing, workforce development and behavioral health service development will also include community spaces and a social enterprise café for residents and the public. A new on-site integrated health clinic leverages the proximity to light rail. 30% of the units will be rented to individuals with a developmental or SMI diagnosis and the remaining units will be eligible income households at no more than 60% AMI. Copa, through the support of LISC Phoenix, partnered with RAIL CDC to understand the needs of the existing neighborhood that experienced displacement due to the Loop 101 construction. Development elements desired by the community are walking access to the light rail station and support of pedestrian signalization for safe access to schools and services.

Status: Pre-development as of 12/31/2023

2024
Grantee

Fort Whipple Veterans Housing



US Vets Housing Corp

- Prescott
- 103 units
- 47,406 sq.ft. non-residential

Funding History

\$500,000 Housing is Healthcare Fund grant

\$39.6 million Leveraged



United States Veterans Initiative (U.S. VETS), in partnership with Gorman & Company, will use grant funds to support the Fort Whipple Veterans Housing Project in Prescott, AZ. The project will produce 103 affordable rental units, targeted to veterans earning between 30% and 60% of the Area Median Income (AMI), and will provide supportive services to senior, homeless or at-risk veterans in Northern Arizona. A unique aspect of this project is the renovation of six historic officers' quarters built in the early 1900s. The remaining 80 units will be housed in a new, four-story apartment complex just below the historic quarters. Set on approximately two acres in the high desert terrain, this development will feature an array of outdoor amenities, including a walking track, an outdoor kitchen, covered seating areas, a service animal area, and an amphitheater for community gatherings and events.

Status: Pre-development

Evaluating Results

The Housing is Healthcare evaluation measures efforts to address social determinants of health for residents living in affordable housing grant recipient locations. Site coordinators participate in three rounds of interviews.

Post-Construction

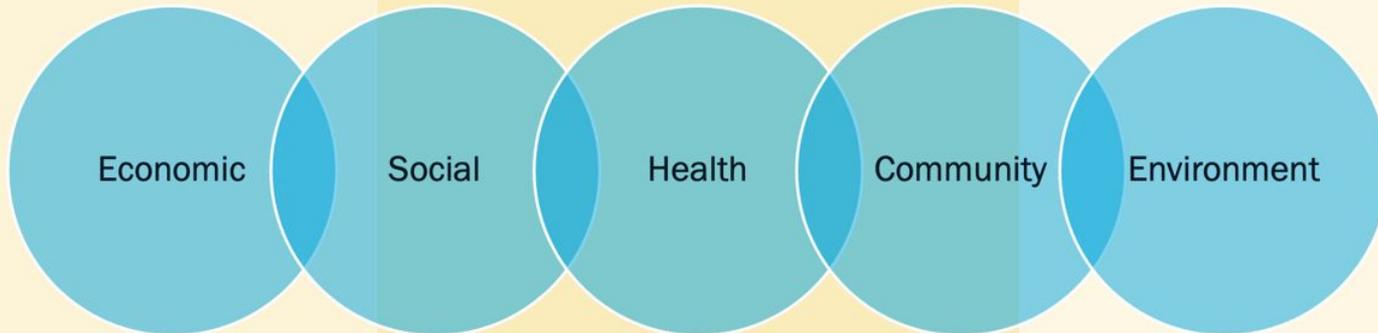
- Residents move in
- Services are initiated
- Sites propose data indicators

6 Months Later

- Residents receive services
- Data are collected

12 Months Later

- Additional data are collected
- Outcomes can be measured



Contact

Terry Benelli
Senior Executive Director
LISC Phoenix
E: tbenelli@lisc.org



LISC



Other SMAC Member Updates



Open Discussion

Federal Relations Updates



Maxwell Seifer
Federal Relations Chief,
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 - AHCCCS Works

A.R.S § 36-2903.09 requires AHCCCS to submit to CMS annually an 1115 Demonstration Waiver that implements:

1. Medicaid Work Requirements,
2. Lifetime Limits, and
3. Cost Sharing for non-emergency use of ED and ambulance transport.

In 2017, AHCCCS submitted an 1115 Waiver for the above which was later approved by CMS in 2019. Implementation for this program previously began, however, the approval was later rescinded by CMS.

1115 Waiver - AHCCCS Works

Medicaid Work Requirements

- AHCCCS Works would require non-exempt “*able-bodied*” adults between the ages of 19 and 55 to meet the following activities for at least 20 hours per week (80 hours per month) to qualify for AHCCCS coverage:
 1. Be employed (including self-employment),
 2. Actively seek employment,
 3. Attend school (less than full time),
 4. Participate in other employment readiness activities, i.e., job skills training, life skills training & health education, or
 5. Engage in Community Service.
- Failure to comply will result in a two-month suspension period of Medicaid coverage

1115 Waiver - AHCCCS Works

Lifetime Limit and Eligibility Ban

- AHCCCS is also proposing to implement the following for “able-bodied adults” pursuant to A.R.S § 36-2903.09:
 - A five-year maximum lifetime coverage limit for able-bodied adult members who are subject to the previously mentioned AHCCCS Works requirements.
 - The authority to ban an eligible person from enrollment for one year if the eligible person knowingly failed to report a change in family income or made a false statement regarding compliance with the AHCCCS Work requirements.

1115 Waiver - AHCCCS Works

Exemptions

In an effort to define “able-bodied” adults, the work requirements and lifetime limit will not apply to individuals who meet any of the following conditions:

- Individuals who are at least 56 years old;
- Individuals who qualify for services through the Indian Health Service or Tribally-Operated Health Facilities, including but not limited to enrolled or affiliate members of federally-recognized American Indian/Alaskan Native (AI/AN) Tribes;
- Women up to the end of the 12-month postpartum period;
- Former Arizona foster youths up to age 26;
- Individuals determined to have a serious mental illness (SMI);
- Individuals who are in active treatment with respect to a substance use disorder (SUD); and many more.

1115 Waiver - AHCCCS Works

AHCCCS Works Exemptions Cont.

- Individuals who are receiving Supplemental Nutrition Assistance Program (SNAP), Cash Assistance, or Unemployment Insurance income benefits;
- Individuals who are determined to be medically frail;
- Full-time high school students who are older than 18 years old;
- Full-time trade school, college or graduate students;
- Victims of domestic violence;
- Individuals who are homeless;
- Individuals who have recently been directly impacted by a catastrophic event;
- Parents, caretaker relatives, foster parents, and legal guardians;
- Individuals who are exempt from the Arizona Department of Economic Security (DES) Nutrition Assistance Work Requirement programs;
- Individuals who were incarcerated within the last six months;
- Veterans regardless of the discharge status; or
- Caregivers of a family member who is enrolled in ALTCS.

1115 Waiver - AHCCCS Works

Exemptions Cont.

- AHCCCS is also proposing a “good cause” exemption. Example circumstances giving rise to good cause may include:
 - The beneficiary has a disability and was unable to meet the requirement for reasons related to that disability;
 - The beneficiary resides with an immediate family member who has a disability and was unable to meet the requirement for reasons related to the disability of that family member;
 - Illness of a household or family member requiring the care of the beneficiary;
 - Illness of the beneficiary;
 - Severe inclement weather (including a natural disaster); or
 - A family emergency or other life-changing event.

1115 Waiver - AHCCCS Works

AHCCCS Works Cost Sharing

In addition pursuant to A.R.S § 36-2903.09, AHCCCS is proposing to implement cost sharing for the following:

- Non-Emergency use of the Emergency Department, and
- Non-Emergency use of ambulance transport when not medically necessary.

AHCCCS is proposing a post-visit medical review applied to the top 20% of ED utilizers. If services are determined to be inappropriately used, AHCCCS will issue three separate warnings before a copay in the amount of \$10 is imposed.

1115 Waiver - AHCCCS Works

As of February 2025, AHCCCS estimates there will be roughly 190,000 members who will be required to meet the Medicaid Work Requirement.

Population Category	Preliminary Estimate
Total Population prior to exclusions (Adults aged 19-55 and 0-133% of the FPL)	414,689
Number of members who meet exclusion criteria	222,944
Estimate of members to whom the work requirement will apply	~190,000

1115 Waiver - AHCCCS Works

Over the past month, AHCCCS engaged with stakeholders through a variety of forums and communication channels. Highlights include:

- 7 Presentations at various new and existing forums reaching 589 total stakeholders
- 140 Written and Verbal comments received through the above forums
- 251 Emails received through our public input mailbox

1115 Waiver - AHCCCS Works

- AHCCCS has submitted the proposal to CMS to meet the statutory deadline
- CMS negotiations on waivers typically take between 6-12 months but can vary depending on prioritization by the federal government and the extent of any disagreements
- Upon approval AHCCCS will need to plan for implementation including additional stakeholder feedback and budgetary analysis
- Once AHCCCS has an implementation budget projection, AHCCCS will need appropriations to move forward with implementation

Reentry Initiatives

Consolidated Appropriations Act (CAA) 2023

- Requirement for all states to offer screening and diagnostic services and targeted case management to juveniles 30 days prior to their release.
- Phased-in implementation by carceral setting with initial go-live on 10/1/2025 with Arizona Dept of Juvenile Corrections (ADJC).

Reentry Initiatives

Reentry Waiver

- Approved by CMS 12/2024, AHCCCS will now be able to provide the following services to incarcerated individuals up to 90 days prior to their expected date of release. Services include:
 - Case Management,
 - Medication Assisted Treatment (MAT),
 - Practitioner Office Visit,
 - Peer Support Services, and
 - 30-day Supply of Prescription Medication.
- Targeting a 10/1/26 go-live date with a similar phased-in approach.
- State legislative approval still needed.

Federal Updates

- New HHS and CMS leadership has now been formally confirmed by the Senate.
 - Ronald F. Kennedy Jr. confirmed to lead Health and Human Services
 - Dr. Mehmet Oz confirmed to lead Centers for Medicare & Medicaid Services
 - Drew Snyder selected to be Medicaid Director
- Communications with CMS have gradually picked up but are not quite back to normal.

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

Division of Member and Provider Services (DMPS) Provider Enrollment Updates



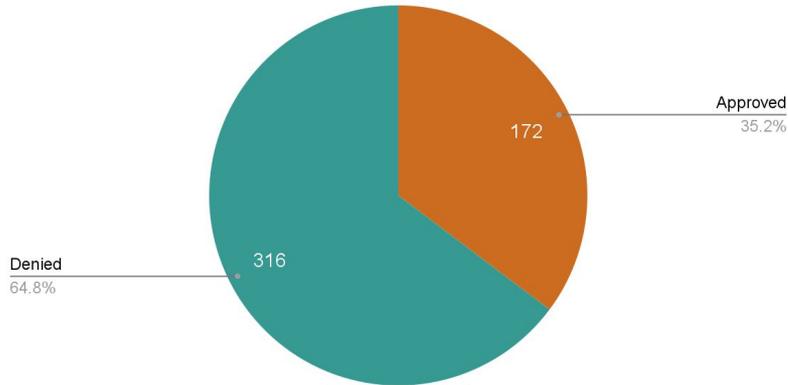
Patty Dennis,
Assistant Director,
Division of Member and Provider
Services

Provider Enrollment Moratorium - Recap

- June 9, 2023 - December 9, 2024
- 5 High Risk Provider Types
 - BH Outpatient Clinic, BHRF, Integrated Clinic, NEMT and CSA

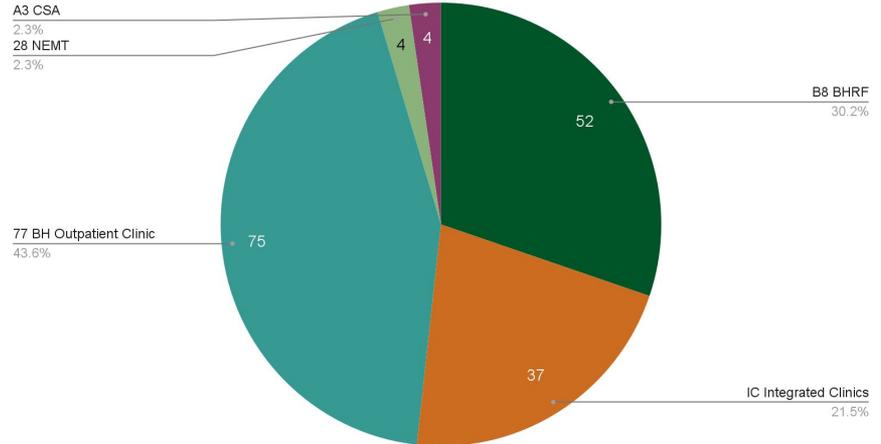
Moratorium Applications Outcomes - Final

Total Applications = 488



Moratorium Applications Approvals - Final

Total = 172

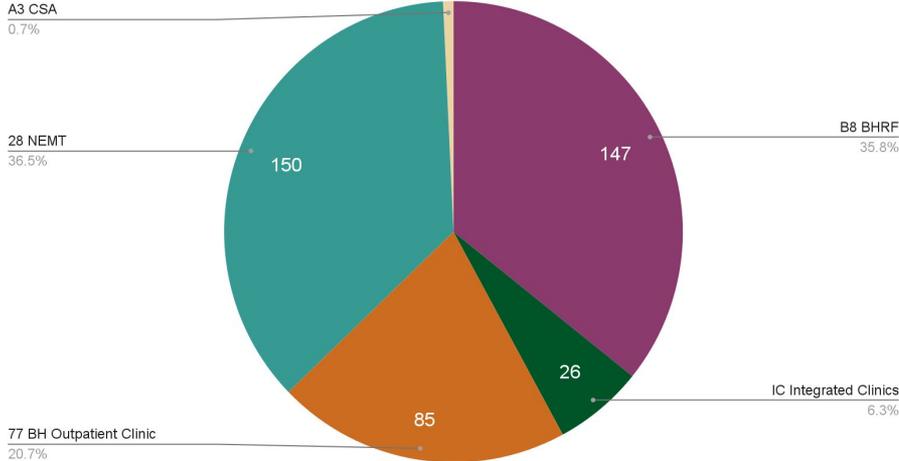


Post Provider Enrollment Moratorium Activity

- 67% of Post Moratorium Activity First 2 Months
 - Dec 2024 - 173 Applications
 - Jan 2025 - 108 Applications

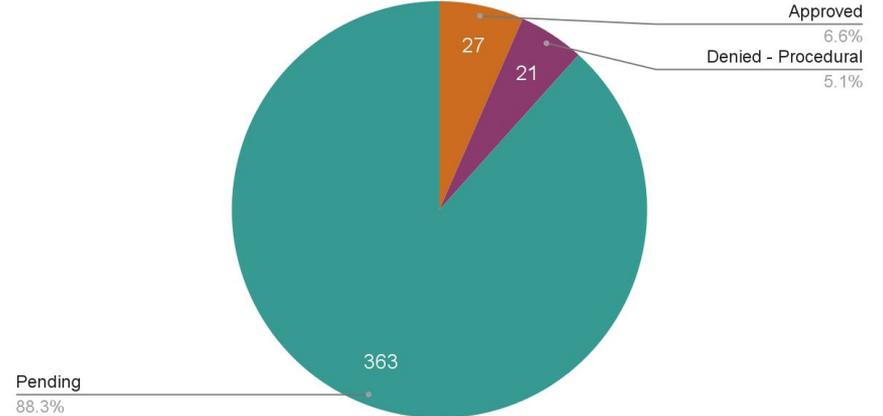
Post Moratorium Applications - 4/6/2025

Total = 411



Post Moratorium Applications Outcome - 4/6/2025

Total Applications = 411



Electronic Funds Transfer (EFT) Requirement for Providers

- Required: Group Billers, FAOs (Facility/Agency/Organizations), and Individual Sole Proprietors
- 2, 574 Provider Notified of EFT Requirement by 12/31/2024
- December 3, 2024 Required for New Provider Enrollments Applications

EFT Outreach Status - 4/4/2025

Total = 2,574

Terminated/Suspended

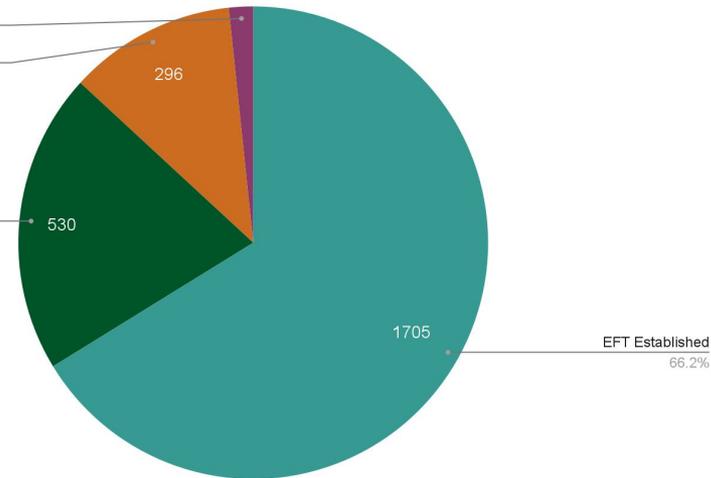
1.7%

Need to Apply

11.5%

In Process

20.6%



Revised Community Partner Assistor Organization (CP-AO) Agreement

- Announced at Jan 2025 CP-AO Meeting
- Outreaching to Site Administrators and Designated Contact
- New Agreement
 - clarifies the requirements and responsibilities of the organization and for the site administrator;
 - added language that a background check, including criminal background, will be done on the organization and all users;
 - additional language that AHCCCS at its sole discretion can deny, suspend or revoke user access for reasons of program integrity, member safety and privacy, or risk of fraud, waste or abuse; and
 - added definitions.

CP-AO Amendment Schedule

- 357 Amendments to be Issued
- 94 Organizations Contacted in 1st Week

Weekly Every Monday:	Organizations in Order of Alphabetization:	Organization Deadline Response:
April 7, 2025	A, B, C	June 9, 2025
Apr 14, 2025	D, E, F	Jun 16, 2025
Apr 21, 2025	G, H, I	Jun 23, 2025
Apr 28, 2025	J, K, L	Jun 30, 2025
May 5, 2025	M, N, O	Jul 7, 2025
May 12, 2025	P, Q, R	Jul 14, 2025
May 19, 2025	S, T, U, V	Jul 21, 2025
May 26, 2025	W, X, Y, Z	Jul 28, 2025





Open Discussion

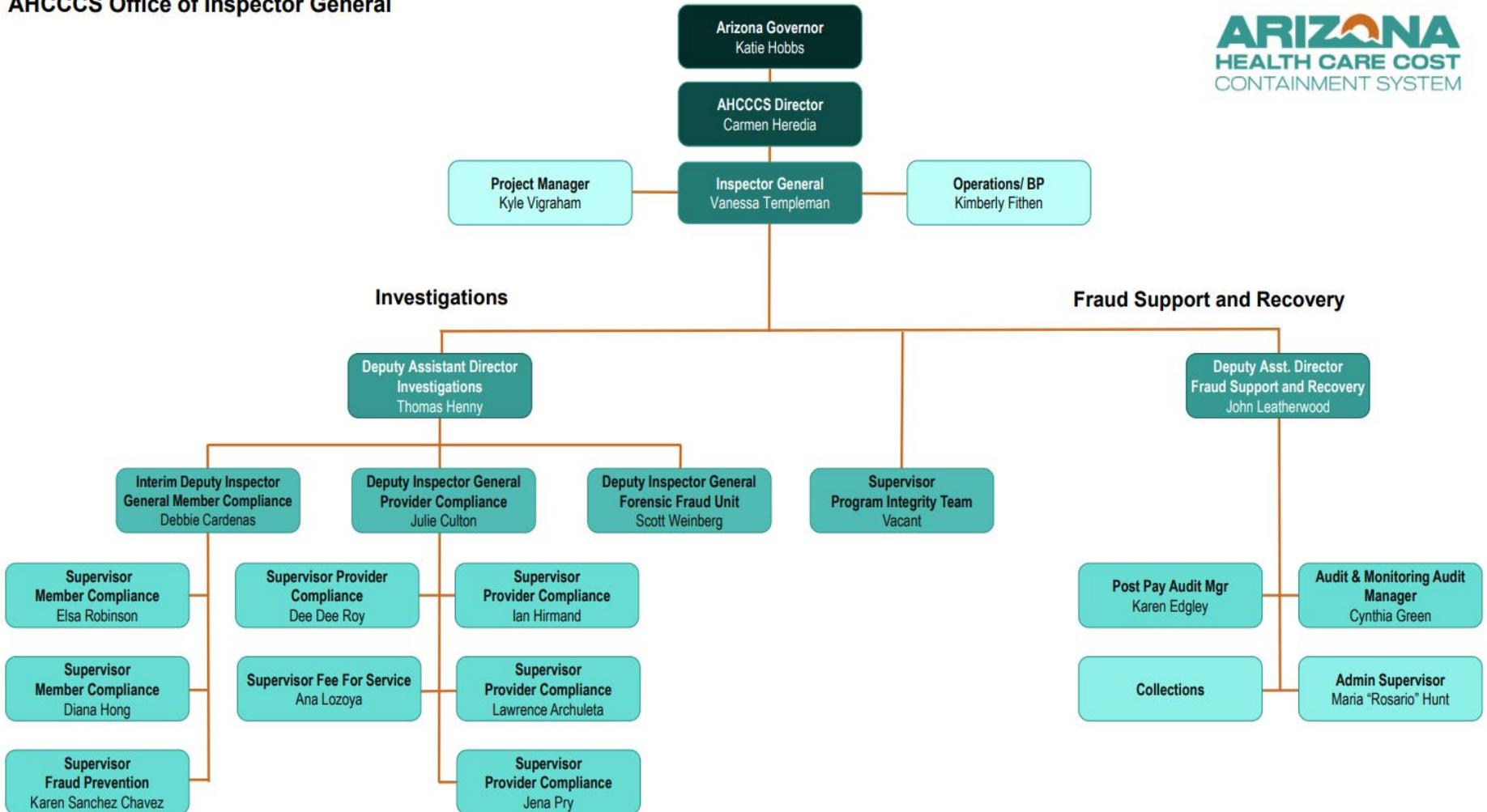
Office of the Inspector General (OIG) Updates



Thomas Henny
Deputy Assistant
Director,
Office of the
Inspector
General



John Leatherwood
Deputy Assistant
Director,
Office of the Inspector
General



AHCCCS OIG Fraud Support & Recovery

- Administrative Team
- Collections Team
- Post Pay Audit Team
- Audit and Monitoring Team



AHCCCS OIG Fraud Support & Recovery

- 8,288 incoming referrals processed
- 1,588 payments processed
- 20 deficit reduction audits completed
- 130 date of death audits completed
- 5 American Rescue Plan audits completed
- 71 Targeted Investment audits completed
- 46 In-Patient audits completed



AHCCCS OIG Investigations

Provider Compliance Investigations

- Active Cases 2,503
- Finished Cases 964
- Suspended 478

Forensic Fraud Unit

- Active Cases 112
- Finished Cases 32
- Suspended 39



AHCCCS OIG Investigations

Member Compliance

Fraud Investigations Unit

- Active Cases 433
- Deferred Cases 1477
- Suspended 45

Fraud Prevention Unit

- Assigned 1,711
- Finished 2,068



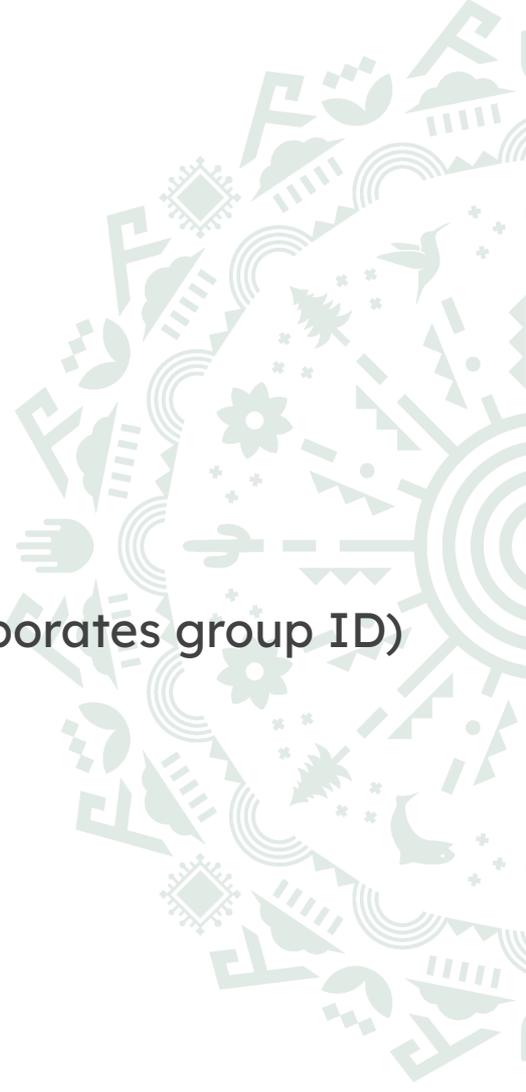
AHCCCS OIG Investigations

Provider Compliance

- Referrals Triaged 2,897
- Quality of Care Concerns 693

Top Case Types

- Behavioral Health 53% (incorporates group ID)
- Habilitation/Attendant Care 11.5%
- Non-Emergency Medical Transportation 6%





Open Discussion

SMAC Updates



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

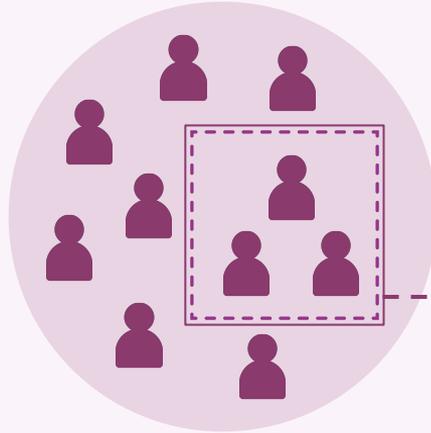
Beneficiary Advisory Council (BAC)

The BAC is a dedicated forum for **people with lived experience** of the Medicaid program. BAC members must include:

Current and/or former Medicaid enrollees

Family members of enrollees

Paid or unpaid caregivers of enrollees



States must publicly post the MAC and BAC annual report, bylaws, membership lists, member recruitment/selection processes, and meeting minutes and **MUST** submit an annual report of all BAC activities.

Medicaid Advisory Committee (MAC)

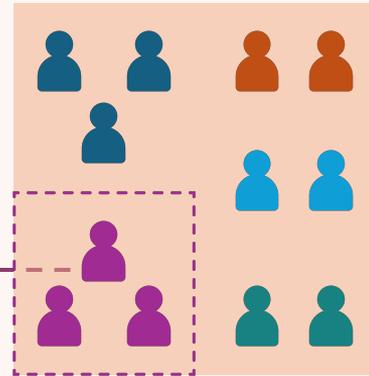
The MAC is a **diverse group of Medicaid stakeholders** with a wide range of perspectives and experiences. The MAC includes BAC members and at least one representative from each of these categories:

Clinical providers/
administrators

Participating plans/
state associations

Other state agencies as
ex officio members

State, local, or
community-based
organizations



By July 10, 2027, 25% of MAC members must be from the BAC*

**In the final rule, CMS opted to phase in this requirement, providing that 10% of MAC members must also be members of the BAC for the period July 9, 2025, through July 9, 2026; 20% for the period July 10, 2026, through July 9, 2027; and 25% thereafter.*

Meeting Requirements



The BAC must meet separately and in advance of MAC meetings.

This helps ensure that the perspective of those with lived experience informs the broader discussions.



The BAC and MAC must offer a variety of meeting participation options.

Can be in-person, virtual, or hybrid, but telephone dial-in is always required.



At least two MAC meetings per year must be public.

Meetings must include dedicated time for public comment.



The BAC and MAC must each meet once per quarter.

Meetings may be held off cycle as necessary.

At least one member of the state's executive staff must attend all BAC and MAC meetings.

SMAC Membership Assignments & Voting Session

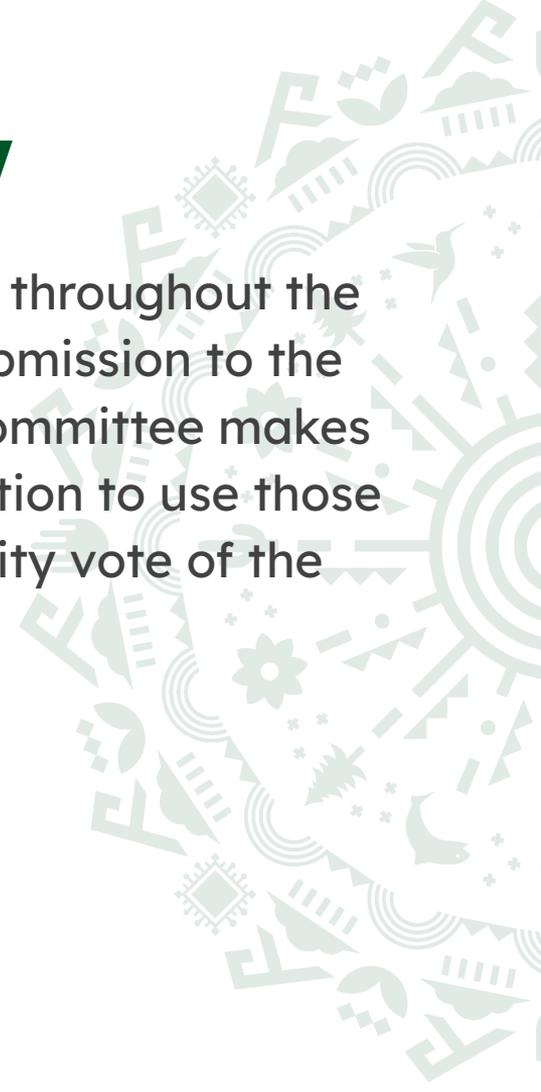
MaryJo Whitfield

VP, Integrated Health,
Jewish Family & Children's Service
Provider/SMAC Member



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 recommendations to move forward with a formal majority vote of the SMAC during an open meeting.



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
(new member)**

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

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

Recommendation for Public Member Assignment

Nominee	Title	Association
Jennifer Burns	Director of Government Relations & Health Policy	Children's Action Alliance



SMAC Member Assignment Vote



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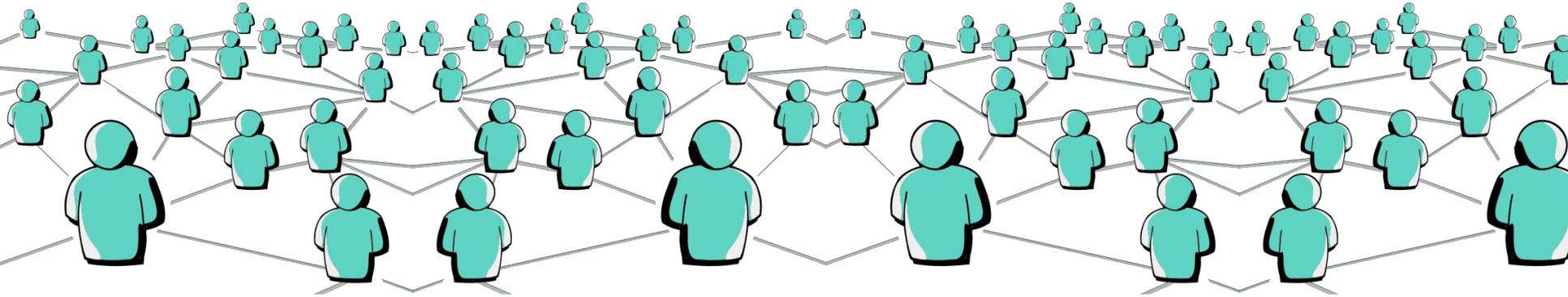
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[@AHCCCS](https://www.linkedin.com/company/AHCCCS)

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



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 and [FAQ](#)





**Thank you and have
a great day!**