

AHCCCS issued a 2018 Integrated Contractors RFI for the YH19-0001 RFP on January 24, 2017 and all comments submitted by stakeholders in regards to the RFI have been reviewed by AHCCCS. It is the responsibility of interested parties to review all pertinent information provided below and previously posted as Major Decisions may differ from the RFI issued by AHCCCS.

**MAJOR DECISIONS FOR YH19-0001 REQUEST FOR PROPOSAL**

➤ **Medicare Advantage Organization (MAO) D-SNP Application Timeline (Subject to Change)**

- o As noted in a previous Major Decisions posting, AHCCCS will require the newly awarded AHCCCS Complete Care Contractor, or its corporate affiliate, to be a Medicare Advantage Dual Eligible Special Needs Plan (D-SNP) in all GSAs in which it holds a Medicaid Contract. The D-SNP shall be appropriately affiliated to meet CMS requirements and approval for Seamless Conversion Enrollment.

**(NOTE: For Medicare Implementation Date of January 1, 2019)**

**For more details visit:** <https://www.cms.gov/Medicare/MedicareAdvantage/MedicareAdvantageApps/>

<b>Activity</b>	<b>Due Date <i>(Estimated Date in Italics)</i></b>
Submit CY 2019 Notice of Intent to Apply (NOIA) using NOIA web tools via CMS websites: <ul style="list-style-type: none"> <li>• New/Initial MA Application: <a href="https://cmsgov.wufoo.com/forms/m1a57pn903l439i/">https://cmsgov.wufoo.com/forms/m1a57pn903l439i/</a></li> <li>• MA Service Area Expansion (including adding a SNP to an existing contract): <a href="https://cmsgov.wufoo.com/forms/m1yb3pho0rgfunf/">https://cmsgov.wufoo.com/forms/m1yb3pho0rgfunf/</a></li> </ul>	November 13, 2017
CMS User ID Connectivity form due to CMS	December 1, 2017
CY 2019 MAO Applications posted on CMS websites	January 9, 2018
CY 2019 MAO State Certification requests due to AHCCCS per requirements of ACOM Policy 313	January 17, 2018

**AHCCCS Complete Care YH19-0001 RFP**

**MAJOR DECISIONS - V**

**10/18/2017**

*Decisions are Subject to Change*

<b>Activity</b>	<b>Due Date (Estimated Date in Italics)</b>
Final deadline to submit CY 2019 NOIA request to CMS	January 26, 2018
CY 2019 MAO <u>and</u> Dual Eligible Special Needs Plan (D-SNP) Applications due to CMS	February 14, 2018
Release of CY 2019 Plan Creation module, Plan Benefit Package (PBP) & Bid Pricing Tool (BPT) software	<i>April 2018</i>
Release of CY 2019 Formulary Submission Module	<i>Mid-May 2018</i>
CY 2019 MA Bids due to CMS	June 4, 2018
State-executed MIPPA contract and contract matrix submissions to CMS	<i>July 2, 2018</i>
CMS completes review and approval of bid data	<i>Late August 2018</i>
All CY 2019 MA contracts fully executed with CMS	<i>Mid-September 2018</i>
Annual Coordinated Election Period begins for CY 2019 MAOs Offering D-SNPs	<i>October 15, 2018</i>

*Estimated Dates are Italicized*

➤ **American Indian Health Program (AIHP) and Integrated Care**

Effective October 1, 2018, the American Indian Health Program (AIHP) will be responsible for provision of integrated care for American Indian adult and child members who select AIHP and who have not been determined to be seriously mentally ill. Integrated care services include both physical and behavioral health services, including services related to a Children's Rehabilitative Service's condition.

In addition to these changes to AIHP, AHCCCS will be making changes to the Acute and CRS managed care program to contract with integrated health plans delivering both physical and behavioral health services to be named AHCCCS Complete Care. American Indian members who have not been determined to be seriously mentally ill will have the choice of integrated care through either AIHP or through AHCCCS Complete Care Contractors effective October 1, 2018. When served by AIHP, the member also has the choice of a TRBHA (when available) for provision of behavioral health services.

As currently applies, American Indian members who are determined to be seriously mentally ill will continue to be assigned to the RBHA for all services but will also have a choice of keeping the RBHA or selecting AIHP for physical health services and the RBHA or TRBHA (when available) for provision of behavioral health services. American Indian members determined to be seriously mentally ill will continue to be permitted to opt out of the integrated RBHA as specified in ACOM Policy 442 to be served by the AHCCCS Complete Care Contractor for physical health services and the RBHA or TRBHA (when available) for behavioral health services.

American Indian members will continue to be allowed to change enrollment between AIHP or the AHCCCS Complete Care Contractor at any time. However, a member can still only change from one Integrated Contractor to another once a year.

American Indian members, title XIX and XXI, on- or off-reservation, eligible to receive services, may continue to choose to receive services at any time from an American Indian Health Facility including an Indian Health Service (IHS) Facility, a Tribally-Operated 638 Health Program, and an Urban Indian Health Program.

To read more about the integration stakeholder meetings, including the tribal specific presentations, please see: <https://www.azahcccs.gov/AmericanIndians/AIHP/integration.html>