

AHCCCS Works 1115 Waiver Proposal Frequently Asked Questions

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Q1: What are the AHCCCS Works requirements?

- A1: Members who are required to comply with AHCCCS Works will participate in at least 80 hours of community engagement activities per month and report those hours by the 10th day of the following month. Activities that count toward the requirement are:
 - Employment, including self-employment,
 - Less than full-time education
 - Job or life skills training
 - Job search activities
 - Community service

Q2: Who is required to participate in AHCCCS Works?

A2: AHCCCS Works applies to "able-bodied" AHCCCS adults who are 19 to 55 years old and who do not qualify for one of the exemptions.

Q3: Who is exempt from AHCCCS Works?

- A3: The AHCCCS Works requirements 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 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);
- Individuals currently receiving temporary or permanent long-term disability benefits from a private insurer or from the government;
- 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 such as a natural disaster or the death of a family member living in the same household;
- Parents, caretaker relatives, foster parents, and legal guardians per A.R.S. 14-5209;
- 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 the Arizona Long Term Care System.

Q4: Are American Indians/Alaskan Natives (AI/AN) required to participate?

A4: 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 are exempt from AHCCCS Works as detailed in A.R.S. §36-2903.09.

Q5: When does the program begin?

A5: The AHCCCS Works waiver proposal is currently undergoing public comment and will be submitted to CMS by March 30, 2025. Once submitted, Arizona and CMS will begin negotiations on the proposal where components such as potential timeline will then be discussed.

Q6: Do members need to participate if they are already employed?

A6: Members who are already working at least 80 hours per month do not need to engage in additional activities but may need to report monthly compliance.

Q7: How many AHCCCS members will participate in AHCCCS Works?

A7: AHCCCS is currently assessing data to determine an estimate of the number of members who would be required to participate in AHCCCS Works. This document will be updated once an estimate is complete.

Q8: What happens if a member does not report enough hours or misses the monthly deadline?

A8: Members subject to this requirement who do not qualify for an exemption and fail to meet the requirements will receive an initial six-month grace period. Failure to comply after the grace period will result in a two-month suspension period unless the member reports and verifies that there was a good cause for non-compliance or initiates an appeal of the suspension. If after the two-month suspension, the beneficiary meets all other eligibility criteria, eligibility will be automatically reinstated.

Q9: Do members lose AHCCCS benefits during the suspension period?

A9: Members will not receive AHCCCS benefits during the two-month suspension period. Suspension notices will be sent to the member with information about how members may be re-enrolled after demonstrating compliance for 30 days. However, a member's coverage may be reinstated at any point during the suspension period if the member is no longer subject to the requirements (for example, if the member qualifies for an exemption at any point during the suspension period).

Q10: Do members need to reapply for AHCCCS coverage after the suspension period?

A10: No. After the two-month suspension period, a member's AHCCCS coverage will be automatically reinstated as long as they meet all other <u>Medicaid eligibility criteria</u>.

Q11: Does the five-year maximum lifetime coverage limit for "able-bodied adult" members apply to previous times the member may have used Medicaid services?

A11: No, five-year maximum lifetime coverage limit would become effective on the date of approval by CMS, and would not be retroactive to include previous times a person received Medicaid benefits.

Q12: Who does the five-year maximum lifetime coverage limit apply to?

A12: The five-year maximum lifetime coverage limit only applies to "able-bodied adult" members who do not fall within one of the exemption categories listed in Q3.

Q13: How will AHCCCS determine whether the use of emergency services is necessary?

A13: AHCCCS will implement a post-visit medical review that will be applied only to the top 20% of ED utilizers. If it is determined that one of the above services was inappropriately used, AHCCCS will issue three separate warning notifications that will be accompanied by various educational materials and resources.

Q14: What happens if the member is unable to meet the above work requirements due to an illness?

- A14: AHCCCS is also proposing a good cause exemption for instances where unexpected circumstances arise that would prevent the member from meeting the requirements. Some example circumstances giving rise to good cause may include:
 - The beneficiary has a disability as defined by the ADA, section 504, or section 1557, and was unable to meet the requirement for reasons related to that disability;

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- The beneficiary resides with an immediate family member who has a disability as defined by the ADA, section 504, or section 1557, 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 (e.g., divorce, homelessness, domestic violence, birth or adoption, or death).