

## **Attachment E**

### **Protocol for Assessment of Beneficiary Eligibility and Need, Infrastructure Planning, and Provider Qualifications**

The Arizona Health Care Cost Containment System (AHCCCS) has received authorization from the Centers for Medicare and Medicaid Services (CMS) through an amendment to the section 1115 demonstration to implement the AHCCCS Housing and Health Opportunities (H2O) demonstration. As described in the Protocol for Assessment of Beneficiary Eligibility and Needs and Provider Qualifications for H2O Services, AHCCCS plans to begin implementation with the most acute member population, inclusive of members who are experiencing homelessness, are living with an SMI designation, and are living with an active chronic health condition or are currently in a correctional health facility with a release date scheduled within 90 days, or released from a correctional facility within the last 90 days. AHCCCS plans to leverage previous experiences and existing infrastructure as a starting place to implement the approved H2O services through a structured, phased-in approach.

AHCCCS plans to procure a Third-Party Administrator (TPA), known as the H2O Program Administrator (H2O-PA) to assist the State in administering the H2O benefit. Covered H2O services and housing-related supportive wrap-around services include:

- Outreach and Education Services,
- Transitional Housing - Apartment or Rental Unit (Rental Assistance),
- Transitional Housing - Transitional Housing Setting (Enhanced Shelter),
- One-time Transition and Moving Costs,
- Home Accessibility Modifications and Remediation,
- Housing Pre-Tenancy Services, and
- Housing Tenancy Services.

The H2O-PA would provide initial and ongoing H2O provider technical assistance and training related to the H2O benefit, including H2O provider onboarding, and implementation of Evidence Based Practice. They would assist with the ongoing collection and analysis of data and report on activities related to the H2O project objectives. Additionally, the H2O-PA would act as a clearinghouse that H2O providers will utilize to submit claims to AHCCCS for H2O services delivered to qualifying members.

Additionally, the H2O-PA would act as the single statewide entity responsible for evaluation and determination of member eligibility for H2O services using AHCCCS parameters and data. They would also be responsible for verifying the member's living situation to confirm they meet the homeless definition. The H2O-PA will receive a file from AHCCCS that includes members who meet the social and clinical risk factors defined in the eligibility criteria categories. The H2O-PA, in coordination with the member's health home, would make a determination of member eligibility for H2O services, coordinate to add the eligibility category to the member's medical record, and connect members to H2O service providers who will initiate services.

Lastly, the H2O-PA would serve as the single point of contact for all enrolled H2O providers. AHCCCS will create three new provider types for H2O providers: Statewide Housing Administrator, Enhanced Shelter, and H2O Provider. The H2O-PA would provide outreach, education, and customized technical assistance to meet the needs of providers involved in the H2O program. At the member level, they would ensure appropriate coordination with the member's clinical team and enrolled health plan to help ensure member care coordination.

## H2O Infrastructure

As part of the approved H2O infrastructure funds, AHCCCS is seeking to contract with a H2O Program Administrator (H2O-PA) to assist with implementation and administration of H2O services. As identified above, the proposed H2O-PA would be responsible for establishing member eligibility, contracting with H2O providers, conducting outreach to Community Based Organizations (CBOs) throughout the state to identify potential H2O providers, providing Technical Assistance for provider enrollment, and assisting with transferring invoices into claims.

In the State's stakeholder engagement thus far, the need for technical assistance was, by far, identified as the most critical need for new and existing providers. Once the State is able to establish the system parameters and protocols necessary to stand up the H2O program, community partners identified that they will need iterative, program-specific technical assistance to ensure they are implementing the program in alignment with agency protocol and guidelines, and to ensure the competency of the staff directly providing the services to members. Accordingly, AHCCCS plans to work in tandem with the proposed H2O-PA to provide initial and ongoing technical assistance related to billing, service delivery, policy implementation, appropriate coordination with community partners (utility providers, etc.) and other benefit programs, data collection, reporting, staff competency evaluation, provider qualifications, and enrollment. The H2O-PA will also assist with collecting ongoing granular technical assistance needs in the community, including providers and members, through educational materials, member forums, and other ways to support individuals experiencing challenges with housing. Successful technical assistance will be an essential part of the initial planning and ultimate success of the H2O program and AHCCCS plans to use utilization and outcome data obtained by the proposed H2O-PA and AHCCCS to inform provider training and technical assistance needs.

As an auxiliary support to help enhance the program described above, a portion of the approved infrastructure dollars will be utilized to amplify Arizona's homeless outreach system. Qualified provider organizations, including CBOs onboarding to become H2O Providers, will be able to access this funding to execute outreach activities as defined in the H2O Services Protocol for members who present as potentially eligible for the H2O program. Outreach will have the explicit goal of engaging a member or potential member and identifying a need for H2O or other covered services, linking the individual to those services or other state and federal benefits programs, benefit program application assistance, and assistance with benefit program applications. As applicable, outreach workers shall coordinate with the member's health plan of enrollment and any care team members that have been identified. Additional provider qualifications for Outreach activities are defined in the H2O Services Protocol.

In addition to the proposed H2O-PA and outreach services, a portion of the approved infrastructure funds will be leveraged to support H2O provider technology needs. While the State is still in preliminary stages of engaging the community to assess existing data system needs, infrastructure activities are anticipated to address needs related to billing, funding for data reporting systems and/or protocols, enhancing current systems such as Homeless Management Information System (HMIS), technical assistance for providers, credentialing, data exchanges between housing and health providers, establishing HIPAA protected client record maintenance systems, or data sharing between the statewide Closed-Loop Referral System (CLRS), Health Information Exchange (HIE) or other referral platform, as applicable. This includes improvements necessary to better utilize existing HMIS data and various continuum of care priorities to align priority populations eligible for H2O services who may not be currently accessing Medicaid covered services but are eligible. AHCCCS seeks to use infrastructure dollars to build upon community partnerships, supporting a data warehouse, and conducting data analytics around effectiveness of housing interventions.

AHCCCS providers are able to use the state-wide CLRS, CommunityCares, which contains screening and referral tools to initiate and conduct referrals for health-related social needs. The state-wide CLRS is free to providers and can be integrated into their standard clinic flow during member intake. The vendor for the statewide CLRS provides training to clinic staff on how to use the CLRS to conduct screenings and effectively provide referrals. Technical assistance and provider support are also available if providers have questions or need troubleshooting technical support. AHCCCS’ health plans are required to encourage provider utilization of the CLRS to screen and refer members for Health-Related Social Needs (HRSN).

Additionally, some facilities will need additional support to implement training protocols in order to comply with all of the provider requirements detailed the H2O Services Protocol. These activities can include actions to meet required licensing and certification guidelines, safety and/or accessibility requirements or program capacity needs related to H2O initiatives and services. The State is still in the process of identifying comprehensive community needs related to these activities, but some specific examples currently identified include the development of a Learning Management System or expanded access to existing learning management tools where H2O providers can access staff training modules to receive the required training. Additionally, Care Management staff at each health plan will be required to use the CLRS to screen and refer members on their caseload annually at a minimum.

Lastly, a small portion of the approved infrastructure funds (no more than 10%) will be utilized for agency capacity needs related to the successful implementation of H2O. This includes activities related to hiring AHCCCS staff and auxiliary staffing support to assist with H2O implementation, evaluation and reporting beyond what current agency staffing levels can absorb.

### Infrastructure Expenditures

AHCCCS may claim FFP in HRSN infrastructure expenditures for no more than the annual amounts outlined in Table 1. If AHCCCS does not claim the full amount of FFP for a given demonstration year, the unspent amounts will roll over to one or more demonstration years for the activities described in STC 34, not to exceed this demonstration period and the state may claim the remaining amount in a subsequent demonstration year. AHCCCS may not claim any FFP in HRSN infrastructure expenditures until the approval of this protocol for HRSN infrastructure is approved. Once approved, the state can claim FFP in HRSN infrastructure expenditures retrospectively to the beginning of the demonstration approval date.

Tables 1-2 summarize the high-level budget in regard to H2O Protocol.

Table 1 – Annual Limits of Total Computable Expenditures for HRSN Infrastructure

	DY12	DY13	DY14	DY15	DY16
<b>Total Computable Expenditures</b>	\$13,500,000	\$13,500,000	\$13,500,000	\$13,500,000	\$13,500,000

Table 2: Draft Budget Estimates of HRSN Infrastructure Expenses Summary\*

Item*	DY12	DY13	DY14	DY15	DY16
AHCCCS Administrative Support	\$0	\$375,000	\$2,375,000	\$2,375,000	\$2,375,000
Development of Business and Operational Practices	\$0	\$625,000	\$3,958,300	\$3,958,300	\$3,958,300
H2O-PA	\$0	\$1,250,000	\$6,500,000	\$6,500,000	\$6,500,000
Outreach and Education Services	\$0	\$1,125,000	\$8,541,700	\$8,541,700	\$8,541,700
Total	\$0	\$3,375,000	\$21,375,000	\$21,375,000	\$21,375,000

\* The amounts indicated in this table are estimates and the actual amounts finalized by AHCCCS may differ from the estimates included in this table.

\*\*The items in this table are within the scope of allowable infrastructure funding authorized in STC 34.

### Infrastructure Timeline

AHCCCS has outlined a timeline for implementing the H2O Program by coordinating with operations, policy, financial, and IT subject matter experts in order to achieve the October 1, 2024, go-live date. Implementing a new, complex program requires a significant amount of effort; AHCCCS has already begun executing on the timeline in order to achieve the go-live date. However, key design features of the H2O Program still require executive decisions and have other dependencies such as the scope of the H2O-PA and the procurement of the H2O-PA. Additionally, the timeline is dependent on approvals from CMS on demonstration-related items in order to fully execute on the proposed implementation timeline.

An initial timeline for the implementation plan has been outlined within the Implementation Plan's Appendix A: Implementation Plan Timeline.