



ARIZONA

HEALTH CARE COST CONTAINMENT SYSTEM

Program and Member Eligibility

Jenny Williams, Policy Analyst
Division of Member and Provider Services

Introductions



General Conditions of Eligibility

- Conditions of eligibility:
 - Valid Application
 - Resident of Arizona
 - Social Security Number
 - U.S. citizen or qualified noncitizen status
 - Assignment of rights to medical benefits and cooperation



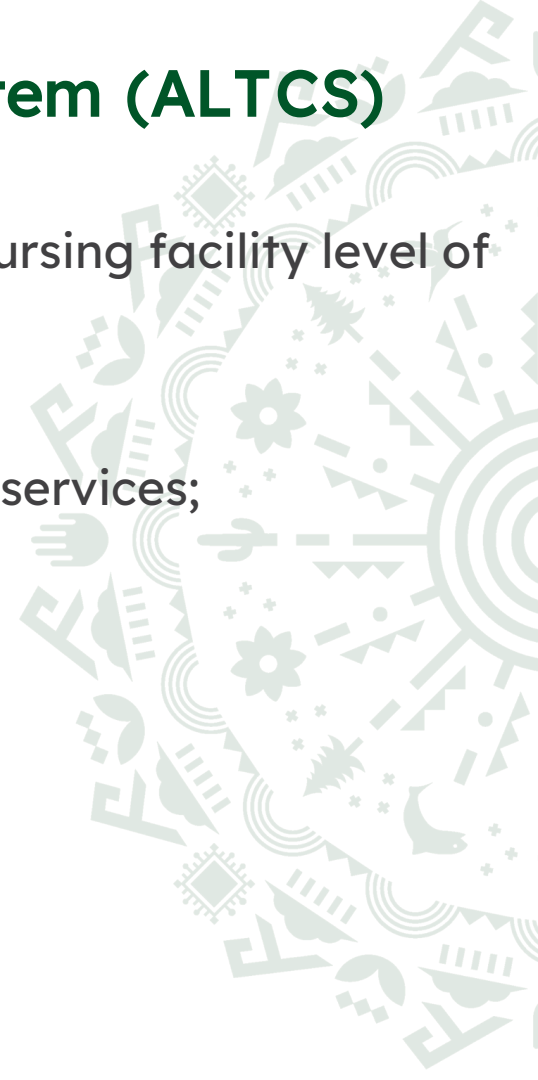
Financial Conditions of Eligibility for Medical Assistance

- Income requirements between 100%-250% FPL depending on the program
- Income Deductions vary by program



AHCCCS – Arizona Long Term Care System (ALTCS)

- ALTCS is for people who need ongoing services at a nursing facility level of care
- Customers may live in:
 - Their own homes while receiving needed in-home services;
 - An assisted living facility; or
 - A skilled nursing facility
- Must be both financially and medically eligible.



Arizona Long Term Care System

Full ALTCS Service Package – 300% of the Federal Benefit Rate

| Individual | Income Limit |
|------------|--------------|
| 1 | \$2,901.00 |

Limited ALTCS Service Package – 100% of the Federal Benefit Rate

| Individual | Income Limit |
|------------|--------------|
| 1 | \$967.00 |

Resource Limit

| Individual | Resource Limit |
|------------|----------------|
| 1 | \$2,000.00 |

ALTCS Enrollment

| If the customer... | Then the customer is enrolled with... |
|--|--|
| Has a developmental disability | The Department of Economic Security/Division of Developmental Disabilities, regardless of where they live |
| Lives within the bounds of a tribal nation or lived within the bounds of a tribal nation before entering an off-tribal land nursing facility | <p>The tribe that serves that tribal land. The customer does not have to be a member of the contracting tribe. For example, a Hopi customer living on the Navajo Nation is enrolled with the Navajo Nation.</p> <p>Exception: Customers who live on tribal lands, but do not have any tribal membership are enrolled with an Elderly or Physically Disabled (EPD) program contractor.</p> |
| Does not live within the bounds of a tribal nation | An EPD program contractor based on the customer's county of fiscal responsibility. |

AHCCCS Medical Assistance Health Plans

- American Indians may choose to receive services by enrolling in an AHCCCS Complete Care Plan or through the American Indian Health Program (AIHP), available in all Arizona Counties
- AIHP is responsible for paying fee-for-service claims submitted for American Indians who have chosen not to enroll in an AHCCCS Complete Care plan. If the American Indian member does not choose a plan and lives within the bounds of a tribal nation, the member will be automatically enrolled in AIHP.

Member Services

- American Indians may receive services through any of the following facilities:
 - Indian Health Service Facilities
 - Tribally Operated Facilities
 - Urban Clinics ([ITUs](#))
- American Indian/Alaskan Native members can switch their enrollment between AHCCCS AIHP and an AHCCCS Complete Care (ACC) Health Plan and back again at any time. However, a member can change from one ACC Health Plan to another (for example, Mercy Care Plan to Molina Healthcare) only once a year.

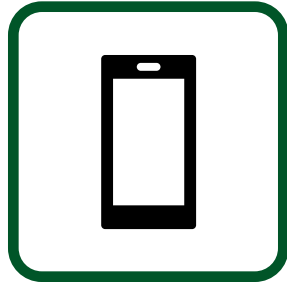


Application Process

There are 5 ways in which AHCCCS receives applications:



Online



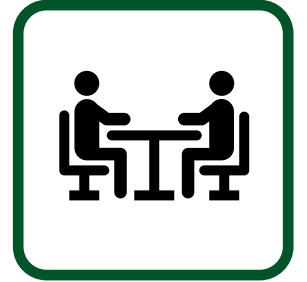
Phone



Mail



Fax



In-Person

Community Assistors

Health-e-Arizona **PLUS**

Create Account | Returning User Log In | Help | FAQs

English | Español | More Languages

Apply for Benefits From Home

Click the following to apply online for Nutrition, Cash or Medical Assistance:

APPLY ONLINE →

If you have questions or need help completing your online application, click "Help" above.

STAY HEALTHY. STAY CONNECTED.

Welcome to Health-e-Arizona Plus!

PROVIDE DOCUMENTS ONLINE

Logged In: Use the "Returning User Log In" link above to log into your account. Select "Provide/View Documents" to provide your documents.

Without Logging In: Use the button below to confirm your identity and provide your documents.

Get Started →

INDIVIDUAL AND FAMILY

Connecting individuals and families to coverage, benefits and services.

Get Started →

ARIZONA DOT

SERVICE ARIZONA / VOTER REGISTRATION

Ready to Register to Vote

GET STARTED

DONATE LIFE ARIZONA

Sign up to save and heal lives as an organ and tissue donor and give others a second chance at life.

LEARN MORE

COMMUNITY ASSISTOR

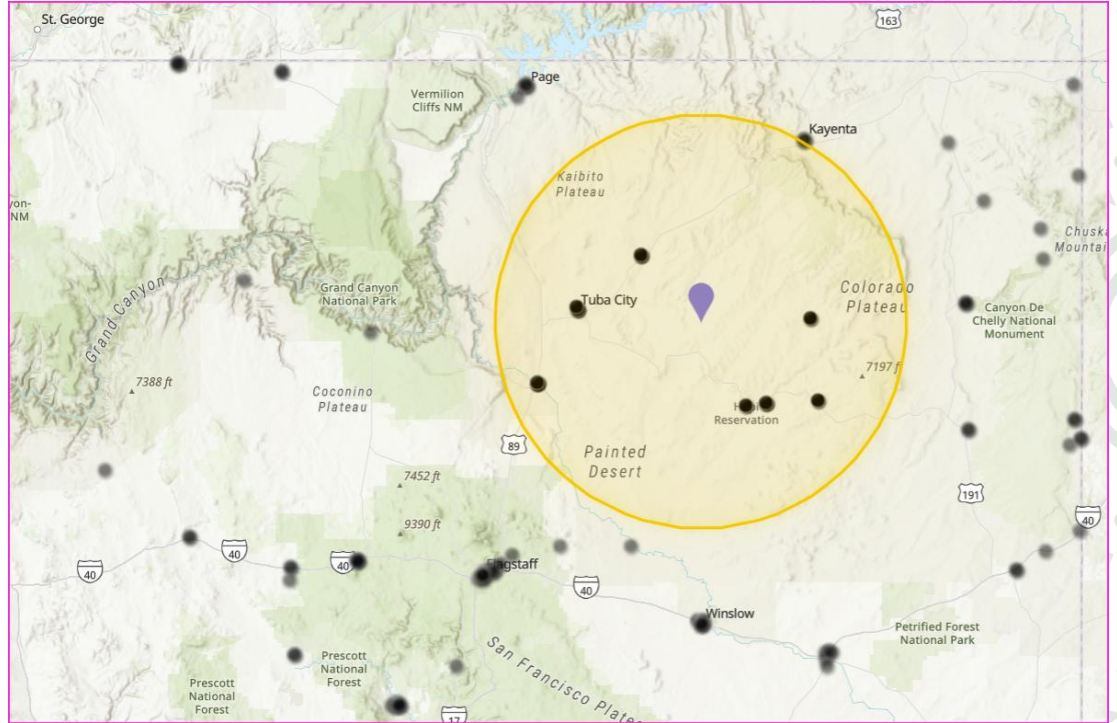
Trained Community Partners that Help Individuals and Families Connect to Coverage, Benefits and Services.

GET STARTED

WIC ARIZONA

The Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides nutrition education, breastfeeding support, supplemental nutritious foods and referrals to health and social services.

LEARN MORE



Applying online @ HealthArizonaplus.gov

Final presentation has Community Assistor Portal
embedded here.

<https://vimeo.com/1056587590/379f55265c?share=copy>



Reference Material

Eligibility Policy Manual (EPM)

<https://epm.azahcccs.gov/EligibilityPolicyManual/index.html>

The AHCCCS Medical Policy Manual (AMPM)

<https://www.azahcccs.gov/shared/MedicalPolicyManual/>

Arizona Revised Statutes, Title 36 - Public Health and Safety

<http://www.azleg.gov/arsDetail/?title=36>

Code of Federal Regulations

<https://www.ecfr.gov/cgi-bin/ECFR?page=browse>



AHCCCS Contact Information

Policy Clarification Requests
Office of Eligibility Policy
Division of Member and Provider Services
150 N. 18th Ave
MD 2600
Phoenix AZ 85007

DMS-PolicyClarificationRequest@azahcccs.gov



Questions?



Thank You.





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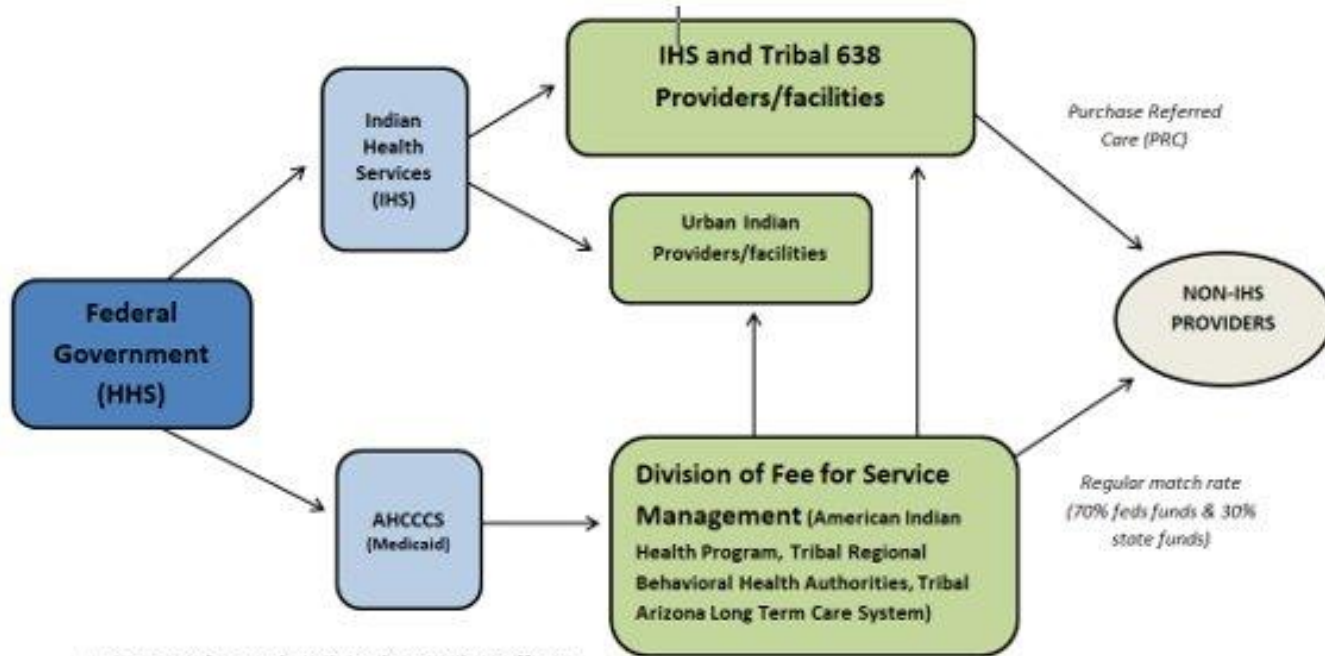
Overview of Tribal Health Care and Arizona Medicaid

Leslie Short, Deputy Assistant Director
Division of Fee-for-Service Management

Basis For Federal Health Benefits for American Indians: Authorities

- Treaties exchanged native lands for federal trust responsibilities and benefits
- Snyder Act authorized health services for American Indians (1921)
- Transfer Act placed Indian health programs in the Public Health Service (1955)
- Indian Self-Determination and Education Assistance Act (1975)
- Indian Health Care Improvement Act and Amendments (1976)

AHCCCS & the Tribal Health Care Delivery System: Financing

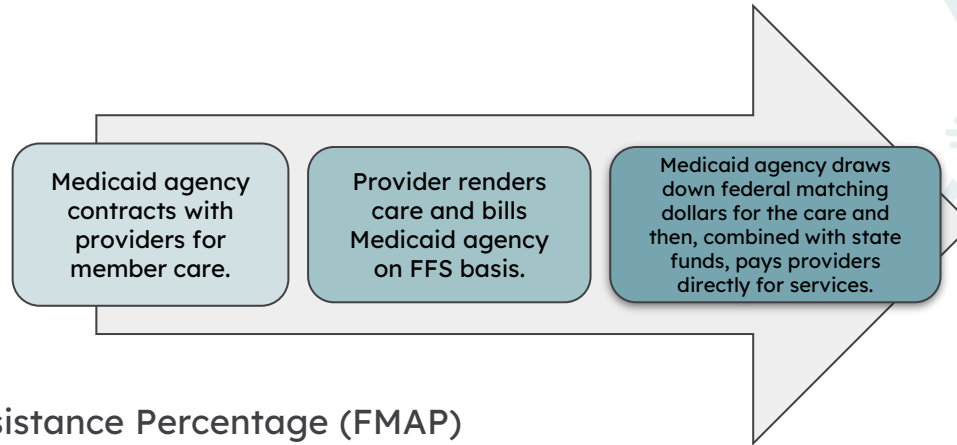


AHCCCS is the Medicaid Authority that offers:

- Comprehensive coverage for low-income Native Americans
- Revenues for Tribal health providers

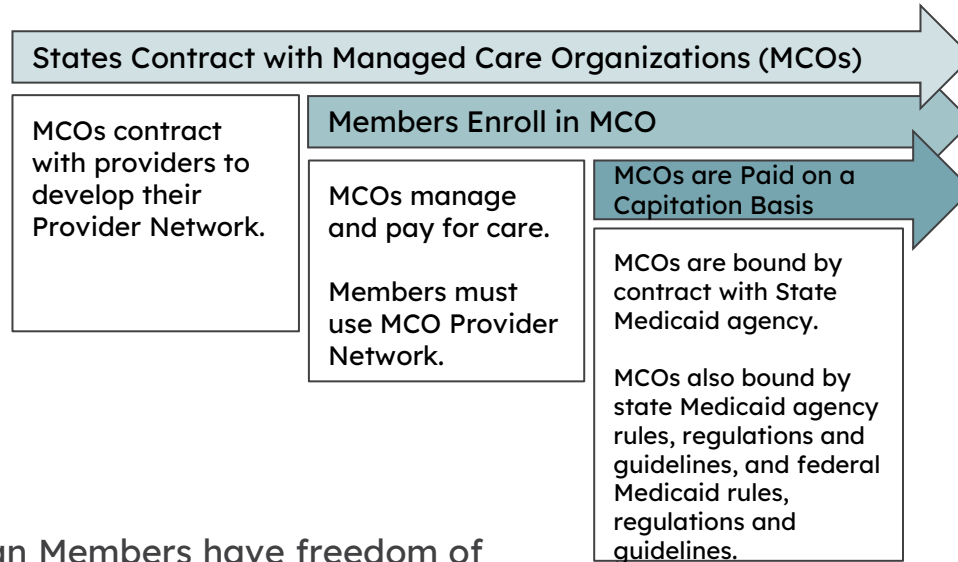
Medicaid FFS Care Delivery System

Traditionally, Medicaid has been administered on a “fee-for-service” basis:



Federal Medical Assistance Percentage (FMAP) for Arizona is ~70%. These are the “federal matching dollars.” IHS/638 facilities primarily receive 100% FMAP.

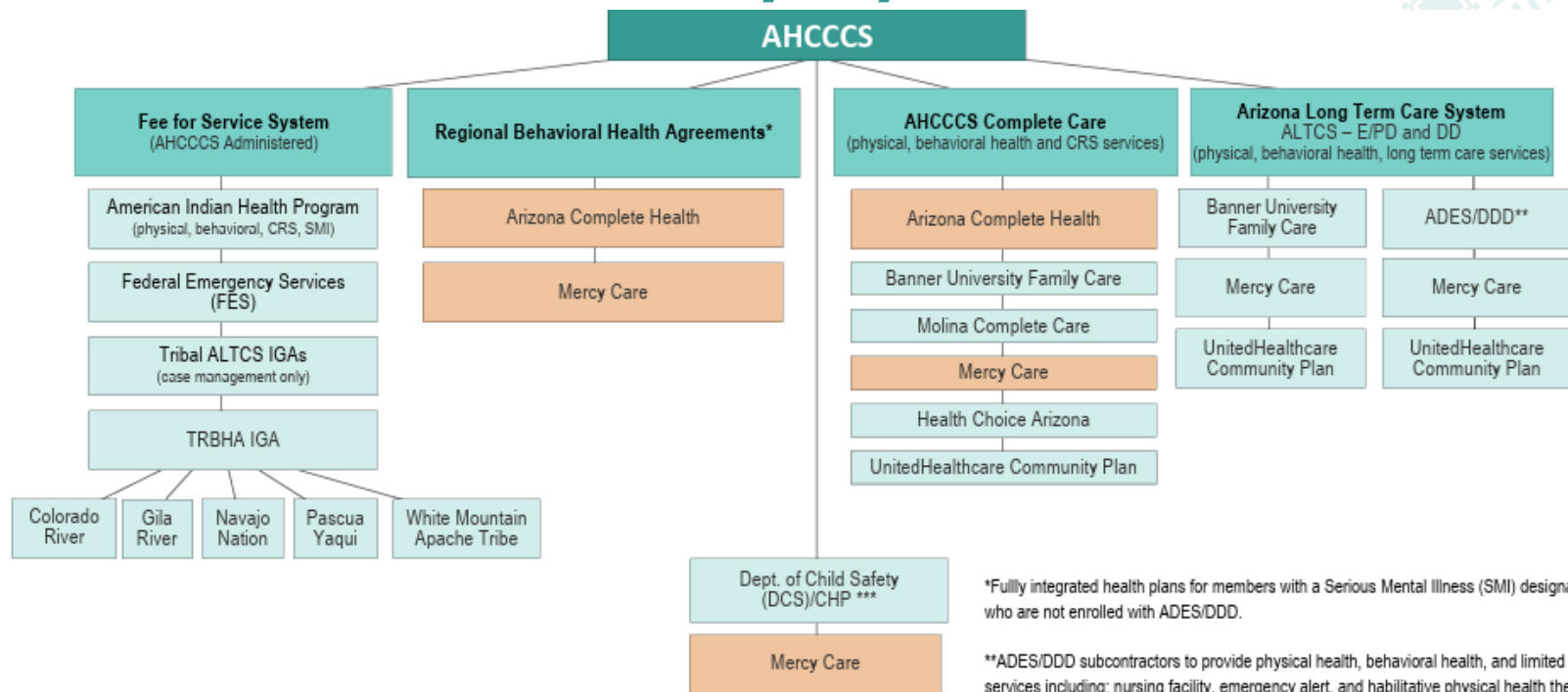
Medicaid Managed Care Delivery



American Indian Members have freedom of choice between MCOs and FFS and can receive care at any IHS/Tribal 638 facility at any time regardless of health plan.



AHCCCS Care Delivery System Effective



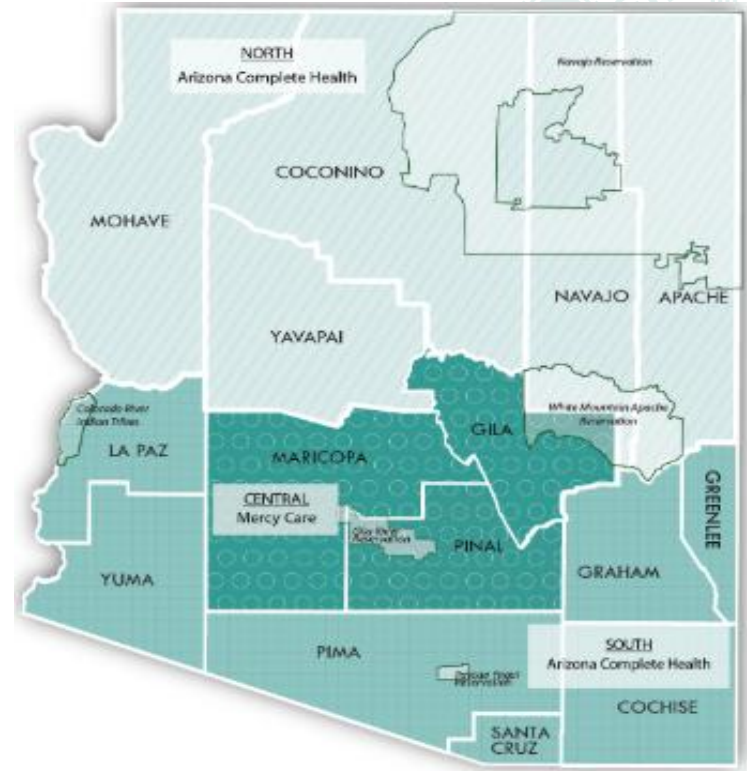
*Fully integrated health plans for members with a Serious Mental Illness (SMI) designation who are not enrolled with ADES/DDD.

**ADES/DDD subcontractors to provide physical health, behavioral health, and limited LTSS services including: nursing facility, emergency alert, and rehabilitative physical health therapy for members age 21 and over. ADES/DDD to provide all other LTSS and coordinate with AHCCCS' Division of Fee for Service Management to provide services for the Tribal Health Program for American Indian members.

***DCS/Comprehensive Health Plan (CHP) statewide subcontractor to provide physical and behavioral health services.

AHCCCS Complete Care Health Plans (ACC Plan)

- Integrated health plans that include physical and behavioral healthcare service providers, including Children's Rehabilitative Services (CRS)
- Manage the provider network for all healthcare services
- Provide comprehensive managed care for the whole person
- ACC-Regional Behavioral Health Authorities (RBHAs)
- Members are established with a PCP and case management is provided as an administrative service.



Note: Zip codes 85542, 85192, 85550 representing San Carlos Tribal area are included in the South GSA.

Behavioral Health Services

- Most members receive all behavioral health services through their chosen ACC Plan
- Services include, but are not limited to:
 - Mental health counseling
 - Psychiatric and psychologist services, and
 - Opioid Use Disorder treatment
- Individuals determined to have a Serious Mental Illness (SMI) are served through an ACC-RBHA or TRBHA



Division of Fee-for-Service Management (DFSM)

- DFSM is the is the division within AHCCCS which serves as the health plan for Fee-For-Service (FFS) Medicaid members and reimburses claims for other persons not enrolled with a contractor.
- DFSM is responsible for the clinical, administrative and claims functions of FFS populations of approximately 250,000 members, including:
 - American Indians enrolled in the American Indian Health Program (AIHP)
 - Members enrolled with the Tribal Regional Behavioral Health Authorities (TRBHAs) for behavioral health services,
 - Tribal Arizona Long Term Care Services (ALTCS), and
 - Individuals in the Federal Emergency Services Program (FESP)

American Indian Health Program (AIHP)

- AI/AN who are eligible and enrolled in AHCCCS may choose to receive coverage through AIHP or an ACC plan.
- Provides medically necessary services, including preventative and behavioral health care services, including Children's Rehabilitative Services (CRS) and AIHP members with an SMI designation.
- Members may receive services from any Indian Health Services (IHS) provider, Tribal 638 provider, or any AHCCCS registered non-IHS provider
 - Per the Provider Participation Agreement all AHCCCS registered providers are required to accept AIHP.
- AI/AN members can switch their enrollment between AIHP and an ACC plan at any time.

AIHP, TRBHA and IHS/Tribal 638 Facilities

| AIHP - American Indian Health Program | TRBHA - Tribal Regional Behavioral Health Authority | IHS - Indian Health Services/Tribal 638 Facility |
|---|--|---|
| <ul style="list-style-type: none">• Provides medically necessary services for AHCCCS enrolled American Indians/Alaskan Natives (AI/AN) members, including preventative and behavioral health care services.• AI/AN members can switch their enrollment between AIHP and an ACC plan at any time. | <ul style="list-style-type: none">• Tribal entities that have an IGA with the AHCCCS administration for the provision of behavioral health services to AI/AN members.• Coordinate the delivery of comprehensive mental health services.• AI/AN members | <ul style="list-style-type: none">• The principal health care system/provider for federally recognized Tribes and AN in the United States; responsible for providing federal health services.• AI/AN members may receive health care from IHS or Tribally-Operated 638 programs. |



Tribal Regional Behavioral Health Authority

- TRBHAs are Tribal entities that have an Intergovernmental Agreement (IGA) with the AHCCCS Administration
- Coordinate the delivery of comprehensive mental health services to AI/AN members assigned to the Tribal entity
 - TRBHAs are responsible for coordinating care, while members may access any AHCCCS-registered provider for behavioral health care
- There are five TRBHAs across the state:
 - Gila River Tribe
 - Navajo Nation
 - Pascua Yaqui Tribe
 - White Mountain Apache Tribe
 - Colorado River Indian Tribes (IGA is for the providing crisis response services only)
- Approximately 67,000 AIHP members are enrolled with a TRBHA

TRBHAs and Tribally Operated 638 Facilities

| TRBHA | Tribally Operated 638 Facilities |
|--|--|
| <ul style="list-style-type: none">● Gila River, Navajo Nation, Pascua Yaqui, White Mountain Apache● Elibiel Tribal members are assigned to their respective TRBHA● Coordinate delivery of comprehensive mental health services | <ul style="list-style-type: none">● Gila River, Pascua Yaqui, and White Mountain Apache (provider type 77)● Any AI/AN member may receive services regardless of enrollment choice● Do not need to be enrolled with a TRBHA |

American Indian Medical Home (AIMH)

First model in the nation to introduce “managed care” without the financial aspects, that is care management benefits, such as:

- Primary care case management
- 24/7 access to a nurse call line
- Diabetes education
- Bi-directional status with the State’s Health Information Exchange
- Helps address health equity
- Currently 9 AIMHs across the state
- Approximately 36% of AIHP members are empaneled with an AIMH



Tribal Arizona Long Term Care Services (Tribal ALTCS)

- Provides Medicaid services to elderly and/or physically disabled American Indians determined eligible for ALTCS
- An integrated health plan that covers acute medical and behavioral health services, and long term care services
- Members are enrolled with Tribal ALTCS if they live, or have lived, on a reservation prior to admission into an off-reservation facility
- AHCCCS works in partnership with seven Tribes and one Urban Indian Health Center, thru IGAs or a contract, to provide long term care case management services to respective tribal members

Tribal ALTCS IGAs

- The goal of Tribal ALTCS is to provide culturally competent, compassionate care to enrolled members of each American Indian Tribe.



Gila River Indian Community



The Hopi Tribe



Navajo Nation



Pascua Yaqui Tribe



San Carlos Apache Tribe



Tohono O'odham Nation



White Mountain Apache Tribe



Traditional Healing Services

Traditional Healing Program Overview

- On October 16, 2024, CMS approved an amendment to provide expenditure authority for coverage of traditional health care practices received through Indian Health Service facilities or facilities operated by Tribes or Tribal organizations.
 - This includes traditional health care practices that are provided in the community by or through IHS or tribal facility's direct employees or contracted traditional health care practice providers.
- Under this approval, Traditional Healing practices would be covered services in both inpatient and outpatient settings.
 - This would aid in care coordination and assist AHCCCS beneficiaries in achieving improved health outcomes.

Traditional Healing Patient and Provider Eligibility

- To receive coverage for traditional health care practices under the demonstration, a member must meet the following criteria:
 - Is a Medicaid beneficiary, and
 - Is eligible to receive services delivered by or through IHS or Tribal facilities as determined by the facility
- To provide traditional health care practices under the demonstration, a provider/practitioner must be employed by or contracted with IHS or Tribal facilities.
- Upon the effective date of benefit, AHCCCS will reimburse for services provided by traditional healers who are employed by or contracted with an IHS/638 facility.
- Additionally, traditional healers employed by or contracted with an Urban Indian Organization may provide reimbursable services through a care coordination agreement with an IHS/638 facility.

Reimbursement Methodology

Reimbursement for Traditional Healing services will be as follows:

- **Outpatient Facilities:** Reimbursed at the All-Inclusive Rate (AIR) published in the Federal Register that is in effect on the date of service for Medicaid outpatient services.
 - This AIR would be a part of the up to 5 AIRs within a single day that can be reimbursed to IHS/Tribal 638 facilities.
- **Inpatient Facilities:** Traditional healing is not paid separate from the existing inpatient AIR and is allowable within the existing AIR. The current inpatient AIR is not inclusive of traditional healing services, but CMS has indicated that it will be included in the future calculation of the AIR.

Traditional Healing Claims Submission Training Needs

What training would be helpful related to claims submission and billing for Traditional Healing services?



Resources



Reporting Quality of Care and/or Fraud, Waste, Abuse

- AHCCCS is committed to ensuring members receive quality health care and are able to access services.
 - [Report Quality of Care Concerns](#) that include (but not limited to): inability to receive health care services; concerns about the quality of care received; issues with healthcare providers or health plans; or timely access to services.
- The Office of Inspector General (OIG) investigates reports of suspected fraud, waste, and abuse of AHCCCS programs
 - [Report member, provider or contractor suspected fraud or abuse](#)

Member Resources

- [Covered Medical Services](#)
- [Accessing Behavioral Health Services](#)
- [SMI Designation & Services](#)
- [Provider Listings](#)



Provider Resources

- [AHCCCS Online Provider Portal](#)
- [AHCCCS Medical Policy Manual \(AMPM\)](#)
- [Fee-for-Service Provider Billing Manual](#)
- [IHS/Tribal Provider Billing Manual](#)
- [Provider Training Resources](#)
- [Subscribe to DFSM Email Notifications/Updates](#)
- Questions regarding claims: dfsmclaimsassistance@azahcccs.gov





Questions?