

GOALS: CONTRACT EXAMPLES

Arizona Long Term Care System (ALTCS)

From Arizona Health Care Cost Containment System Administration, Program Requirements, Section D.2, Introduction.

2. INTRODUCTION

AHCCCS' Mission and Vision

The AHCCCS Administration's mission and vision is to reach across Arizona to provide comprehensive quality healthcare to those in need while shaping tomorrow's managed health care from today's experience, quality and innovation. The AHCCCS Administration's ALTCS goal is to continuously improve ALTCS' efficiency and effectiveness and support member choice in the delivery of the highest quality long term care to our customers.

The AHCCCS Administration supports a program that promotes the values of:

- Choice
- Dignity
- Independence
- Individuality
- Privacy
- Self-determination

... ALTCS Guiding Principles

- *Member-centered case management.* The member is the primary focus of the ALTCS program. The member, and family/significant others, as appropriate, are active participants in the planning for and the evaluation of services provided to them. Services are mutually selected to assist the member in attaining his/her goals(s) for achieving or maintaining their highest level of self-sufficiency. Information and education about the ALTCS program, their choices of options and mix of services should be accurate and readily available to them.
- *Consistency of services.* Service systems are developed to ensure a member can rely on services being provided as agreed to by the member and the Program Contractor.
- *Accessibility of network.* Access to services is maximized when they are developed to meet the needs of the members. Service provider restrictions, limitations or assignment criteria are clearly identified to the member and family/significant others. Service networks are developed by the Program Contractor to meet member's needs which are not limited to normal business hours.
- *Most Integrated setting.* Members are to be maintained in the most integrated setting. To that end, members are afforded choice in remaining in their own home or choosing an alternative residential setting versus entering into an institution.

- *Collaboration with stakeholders.* The appropriate mix of services will continue to change. Resources should be aligned with identified member needs and preferences. Efforts are made to include members/families, service providers and related community resources, to assess and review the change of the service spectrum. Changes to the service system are planned, implemented and evaluated for continuous improvement.
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Hawaii QUEST Expanded Access (QExA)

From section II.

II. PROGRAM DESCRIPTION AND OBJECTIVES

The QEx Demonstration is designed to use a managed care delivery system to create efficiencies in the Medicaid program and enable the extension of coverage to certain individuals who would otherwise be without health insurance...

Approximately 37,250 beneficiaries who qualify in ABD categories will be enrolled in the Demonstration during this renewal period. This renewal of the Demonstration program puts all of the State's full-benefit Medicaid eligible populations into managed care delivery systems and will increase access to home and community-based services for the State's most vulnerable populations. Through this Demonstration and the HPHCA, Hawaii expects to reduce its rate of uninsurance and improve quality and efficiency while stabilizing cost.

Under this Demonstration, Hawaii expects to achieve the following objectives:

- Improve health outcomes and reduce inappropriate utilization;
- Improve the overall health of Hawaii's most vulnerable citizens under a coordinated care management environment;
- Decrease the percentage of uninsured individuals in the State; and
- Expand access to Home and Community Based Services (HCBS).