

# Arizona Section 1115 Waiver Amendment Request Hospital Presumptive Eligibility for Pregnant Women

## I. Overview

The Affordable Care Act created the opportunity for hospitals to qualify people for Medicaid through the use of presumptive eligibility. (See 42 CFR § 435.1103). The State of Arizona is currently in the State Plan Amendment process and making the needed system changes to launch hospital presumptive eligibility (HPE) in the State.

Under the federal requirements – 42 CFR § 435.1103(a) – HPE only allows pregnant women to access ambulatory prenatal care during the presumptive eligibility period. Meanwhile, other individuals eligible for HPE will have access to the full Medicaid State Plan benefit package, including inpatient. For continuity of care and access to care, the State is seeking authority to permit pregnant women to access the entire State Plan and 1115 waiver benefit package.

Accordingly, AHCCCS seeks the following authority:

- **Reimbursement CNOM:** Expenditure authority – waiver from 42 CFR § 435.1103(a) – to allow the State to pay for all Medicaid covered services under Arizona’s State Plan and 1115 waiver for pregnant women during their HPE period.

## II. Public Process

HPE and the unique issue facing pregnant women were discussed in an open tribal consultation on June 12, 2014 that included tele-conferencing capabilities. (See <http://www.azahcccs.gov/tribal/consultations/meetings.aspx>.) This issue was also discussed at a meeting of the State Medicaid Advisory Committee on April 9, 2014. (See <http://www.azahcccs.gov/community/meetings/SMAC.aspx>.) This amendment request is posted to the AHCCCS website here: <http://www.azahcccs.gov/reporting/federal/waiver.aspx>.

## III. Data Analysis- “With Waiver” vs. “Without Waiver”

The services for which AHCCCS proposes to reimburse – services that are not considered ambulatory prenatal care – are currently reimbursable services. It is unknown how many hospitals will participate in the State’s HPE program. Of the hospitals that elect to participate in HPE, it is also unknown how many pregnant women will become HPE eligible and will require access to services other than ambulatory prenatal care. Thus, a with/without waiver analysis cannot be completed at this time.

## IV. Allotment Neutrality

N/A. The amendment does not impact the XXI population.

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## V. Details

The Arizona Health Care Cost Containment System (AHCCCS) administers Medicaid to nearly 1.6 million Arizonans. As the AHCCCS Administration prepares to launch the State's mandated HPE program, the limitation on benefits for pregnant women as a group was a concern, particularly since other eligibility populations would have access to the entire State Plan benefits package.

Pregnant women have unique health care needs and having access to the entire State Plan and 1115 benefits package allows for greater access to care. For those women who subsequently apply for full Medicaid eligibility, allowing access to the entire State Plan and 1115 benefits package during the HPE period allows for better continuity of care as that individual is transferred to a health plan under the State's managed care system. In addition to the quality and access to care concerns, the State would have to build a separate process to deny claims from pregnant women who were accessing care other than ambulatory prenatal care.

Considering all of these factors, the unique needs of pregnant women and the purpose of HPE – to allow a pathway for greater access to care – the State believes that allowing reimbursement of services provided to pregnant women under the entire State Plan and 1115 package is necessary and in the best interest of Arizona Medicaid beneficiaries.

## VI. Evaluation Design

The demonstration would support collection of data to identify the needs and costs associated with care provided to pregnant women during the HPE period.

## VII. Conclusion

Currently, federal regulation limits services available to pregnant women under HPE to ambulatory prenatal care. Arizona's Medicaid program is proposing to reimburse for the full array of services available to eligible Medicaid beneficiaries under the State Plan and 1115 waiver provided to pregnant women who are eligible under the Hospital Presumptive Eligibility program.