

Arizona Managed Care Program Features, as of 2013

Features	Arizona Health Care Cost Containment System
Program type	Comprehensive MCO + any other type
Statewide or region-specific?	Statewide
Federal operating authority	1115 demonstration
Program start date	7/13/1982
Waiver expiration date (if applicable)	9/30/2016
If the program ended in 2013, indicate the end date	
Populations enrolled	
Low-income Adults	Mandatory
Aged, Blind or Disabled Children or Adults	Mandatory
Non-Disabled Children (excluding children in foster care or receiving adoption assistance)	Mandatory
Individuals receiving Limited Benefits	Voluntary
Low-income adults not otherwise eligible and covered prior to 2014 under a waiver or other authority	Mandatory
Full Duals	Mandatory
Partial Duals	Mandatory
Children with Special Health Care Needs	Mandatory
Native American/Alaskan Natives	Voluntary
Foster Care and Adoption Assistance Children	Voluntary
Enrollment choice period	Pre-assigned
Enrollment broker name (if applicable)	
Notes on enrollment choice period	If an individual does not choose their plan prior to eligibility being determined, they are auto-enrolled in a health plan and given 30 days to choose a different plan. Native Americans/Alaskan Natives who do not choose are assigned to a FFS plan and can choose to enroll in an MCO at any time.
Benefits covered	
Inpatient hospital physical health	X

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Inpatient hospital behavioral health (MH and/or SUD)	X
Outpatient hospital physical health	X
Outpatient hospital behavioral health (MH and/or SUD)	X
Partial hospitalization	
Physician	X
Nurse practitioner	X
Rural health clinics and FQHCs	X
Clinic services	
Lab and x-ray	X
Prescription drugs and prosthetic devices	X
EPSDT	X
Case management	X
Health home	X
Family planning	X
Dental services (medical/surgical)	X
Dental (preventative or corrective)	X
Home health agency services	X
Personal care (state plan option)	X
HCBS waiver services	X
Private duty nursing	X
ICF-IDD	X
Nursing facility services	X
Hospice care	X
Non-Emergency Medical Transportation	X
Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)	
Quality assurance and improvement	
HEDIS data required?	No
CAHPS data required?	Yes

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Accreditation required?	No
Accrediting organization	
EQRO contractor name (if applicable)	Health Services Advisory Group
Performance incentives?	Yes
Payment bonuses/differentials to reward MCOs	
Preferential auto-enrollment to reward MCOs	X
Public reports comparing MCO performance on key metrics	X
Withholds tied to performance metrics	X
Participating plans and regions served	
Plans in Program	AZ Dept of Economic Security, Comprehensive Medical and Dental Program; AZ Dept of Economic Security, Division of Developmental Disabilities; Care 1st; Health Choice Arizona; Maricopa Health Plan; Mercy Care Plan; Phoenix Health Plan; University Family Care; Bridgeway Health Solution; Bridgeway Health Solutions (ALTCS); United Healthcare (ALTCS); Mercy Care (ALTCS); United Healthcare
Notes	
Program notes	LTSS dual-eligible enrollment was 27,172 and LTSS non dual-eligible enrollment was 24,088. Medical enrollment total includes 37,791 SLMB Part B Buy in. Also, MCOs provided Family Planning Services only to SOBRA Family Services member. The number of SOBRA Family Services members by MCO is as follows: UnitedHealthcare: 1,000 Care 1st Arizona: 319 Health Choice AZ: 817 Maricopa Health Plan: 191 Mercy Care Plan: 1,297 Phoenix Health Plan: 939 University Family Care: 273 Bridgeway Health Solutions: 114 SOBRA Family Planning Total: 4,950.