

Welcome to the American Rescue Plan Act Stakeholder Feedback Forum

While you are waiting TEST YOUR AUDIO. LISTEN FOR MUSIC.

You were automatically muted upon entry.

Please only join by phone or computer.



Thank you.







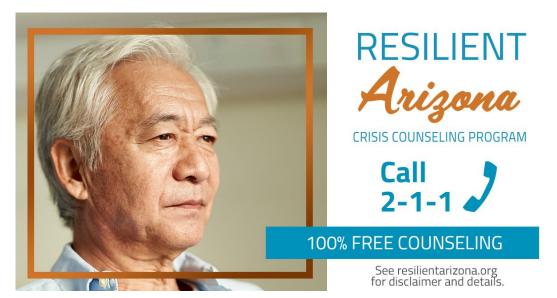














































Welcome! We will begin shortly.







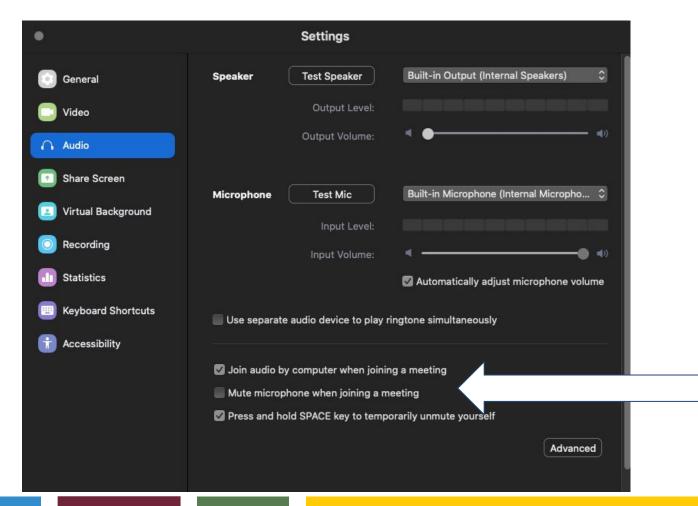


Zoom Webinar Controls





Audio Settings





Tips for successful ZOOM PARTICIPATION





















MUTE your mic when you're not speaking





PREPARE & queue docs or links that you plan to share

BACKGROUND
NOISE watch when
turning on mic





Stay FOCUSed by not texting or side conversations

Limit the
DISTRACTIONS
around you





Use GALLERY
VIEW to see all
participants

Look at the CAMERA not your screen





Use CHAT to ask questions or share resources











American Rescue Plan Act (ARPA) Section 9817 10% HCBS FMAP Enhancement



Agenda

- 1. Overview of ARPA
- 2. Overview of the State Medicaid Director Letter Guidance for the Home and Community Based Services Section
- 3. Spending Plan Submission
- 4. Services Eligible
- 5. Eligible Improvement Activities
- 6. Open Discussion



Definitions and Acronyms

AHCCCS: Arizona Health Care Cost Containment System (Arizona's Medicaid)

ARPA: American Rescue Plan Act

CMCS: Center for Medicare, Medicaid and Chip Services

FMAP: Federal Medical Assistance Percentage (commonly known as

federal match)

HCBS: Home and Community-Based Services as defined in <u>A.R.S.</u>

§36-2931 and A.R.S. §36-2939.



American Rescue Plan Act of 2021





American Rescue Plan Act of 2021 - Section 9817



10% Increase to FMAP for HCBS

4/1/21 - 3/31/22

- HCBS provision offers temporary 10 percentage point bump for certain HCBS services
- <u>State Medicaid Director Letter</u> from CMCS issued May 13, 2021 detailing:
 - Services eligible for the enhancement and how to claim the enhancement
 - How to demonstrate compliance with the ARPA's non-supplantation language via a maintenance of effort on eligibility, covered services, and provider rates in effect as of April 1, 2021
 - Examples of activities that enhance, expand, or strengthen HCBS
 - Requirements to supplement, not supplant, and
 - Mandates that states to submit both an initial and quarterly HCBS spending plan and narrative on the state's planned HCBS activities; initial submission must occur within 30 days of release of this guidance (by 6/12/21)

Services Eligible to Claim 10% FMAP Increase

- Home Health Care
- Personal Care Services
- Self-Directed Personal Care Services
- Case Management
- School Based Services

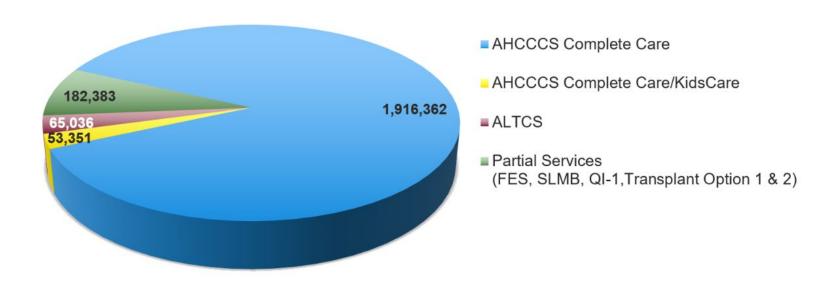
- Rehabilitative Services

 (including mental health and substance use disorder services)
- Private Duty Nursing
- Alternative Benefit Plans



AHCCCS Enrollment by Program (as of May 1, 2021)

Total Enrollment 2,217,132





Section 9817 - HCBS ARPA Program Requirements

CMS expects that states will:

- Not impose stricter eligibility standards, methodologies, or procedures for HCBS programs and services than were in place on April 1, 2021;
- Preserve covered HCBS, including the services themselves and the amount, duration, and scope of those services, in effect as of April 1, 2021; and
- Maintain HCBS provider payments at a rate no less than those in place as of April 1, 2021.



Spending Plan

- CMS is requiring states to submit both an initial and quarterly HCBS spending plans and narratives to CMS on the activities that the state has and plans implement.
- States must submit the initial HCBS spending plan and narrative within 30 days of the release of SMDL #21-003.
 - NEW: Due July 12, 2021.
- Spending plans are subject to CMS approval, and will be made public.
- There is opportunity to amend the initial spending plan through subsequent quarterly reports.



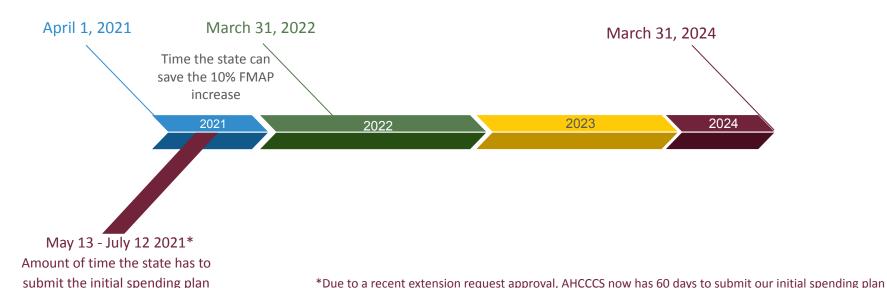
Eligible HCBS Improvement Activities

- New and/or Additional HCBS
- Payment Rates
- Specialized Payments
- Workforce Recruitment & Training
- Supports for Family Caregivers
- One-Time Community Transition Costs
- Addressing Social Determinants of Health and Health Disparities
- Expanding Capacity
- Assistive Technology and Other
 Supports for Persons with Disabilities

- Strengthening Assessment and Person-Centered Planning Practices
- Quality Improvement Activities
- Developing Cross System Partnerships
- Training and Respite
- Improving Eligibility Systems
- Expanding Use of Technology and Telehealth
- Providing Access to Additional Equipment or Devices



Time the State Can Spend the Savings Accrued From the 10% FMAP Increase





Important Factors

- The funding is short-term and must be spent by March 31, 2024 (3 years).
- These efforts cannot negatively impact our current HCBS. It can only add programs, services and activities.
- If there is a new program/activity/service funded, it must be completed by March 2024 or have a plan to fund it in another way after March 2024.



For Discussion

What do you think we should focus efforts on?



Context for feedback:

- **Details** of the suggestion
- Sustainability after enhanced funding concludes
 - Ease of implementation
 - Impact on our members



DISCUSSION

