



**Contract Year Ending 2021
Arizona Long Term Care System/Elderly and
Physical Disability Capitation Rate Notification -
Nursing Facility Supplemental Payments**

October 1, 2020 through September 30, 2021

**Prepared for:
The Centers for Medicare & Medicaid Services**

**Prepared by:
AHCCCS Division of Health Care Management**

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CYE 21 ALTCS/EPD Program Capitation Rate Notification Document – Nursing Facility Supplemental Payments

Table of Contents

Introduction and Limitations	1
Section I Medicaid Managed Care Rates	2
I.1. General Information	2
I.2. Data	2
I.3. Projected Benefit Costs and Trends	2
I.4. Special Contract Provisions Related to Payment	2
I.4.A. Incentive Arrangements	2
I.4.B. Withhold Arrangements	2
I.4.C. Risk-Sharing Mechanisms	2
I.4.D. Delivery System and Provider Payment Initiatives	2
I.4.D.i. Rate Development Standards	2
I.4.D.ii. Appropriate Documentation	2
I.4.D.ii.(a) Description of Delivery System and Provider Payment Initiatives	2
I.4.D.ii.(a)(i) Type and Description of Directed Payment Arrangements	2
I.4.D.ii.(a)(ii) Directed Payments Incorporated in Capitation Rates	2
I.4.D.ii.(a)(iii) Directed Payments Under Separate Payment Arrangement	3
I.4.D.ii.(a)(iii)(A) Aggregate Amount	3
I.4.D.ii.(a)(iii)(B) Actuarial Certification of the Amount of the Separate Payment Term	3
I.4.D.ii.(a)(iii)(C) Providers Receiving Payment	3
I.4.D.ii.(a)(iii)(D) Distribution Methodology	3
I.4.D.ii.(a)(iii)(E) Estimated Impact by Rate Cell	4
I.4.D.ii.(a)(iii)(F) Pre-Print Acknowledgement	4
I.4.D.ii.(a)(iii)(G) Future Documentation Requirements	4
I.4.E. Pass-Through Payments	4
I.5. Projected Non-Benefit Costs	4
I.6. Risk Adjustment and Acuity Adjustments	4
Section II Medicaid Managed Care Rates with Long-Term Services and Supports	4
Section III New Adult Group Capitation Rates	4
Appendix 1: CYE 21 NF-SP Payments	5
Appendix 2: CYE 21 Certified and Adjusted Capitation Rates	6

CYE 21 ALTCS/EPD Program Capitation Rate Notification Document – Nursing Facility Supplemental Payments

Introduction and Limitations

The purpose of this capitation rate notification document is to provide documentation of the data, assumptions, and methodologies used to allocate a delivery system and provider payments initiative (i.e., state directed payment), the Arizona Health Care Cost Containment System (AHCCCS) Nursing Facility Supplemental Payments (NF-SP) Program, across the October 1, 2020 through September 30, 2021 (Contract Year Ending 2021 or CYE 21, or alternatively, Federal Fiscal Year 2021 (FFY 21)) capitation rates for the Arizona Long Term Care System/Elderly and Physical Disability (ALTCS/EPD) Program. The NF-SP are payments under 42 CFR § 438.6(c)(1)(iii)(B), as codified in the 2016 Medicaid and Children’s Health Insurance Program (CHIP) Managed Care Final Rule. This capitation rate notification document was prepared for Centers for Medicare & Medicaid Services (CMS), or its actuaries, for review of the NF-SP allocation methodology. This capitation rate notification document also provides the CYE 21 ALTCS/EPD Program capitation rates with and without the NF-SP for CMS review. This capitation rate notification document may not be appropriate for any other purpose.

This capitation rate notification document may also be made available publicly on the AHCCCS website or distributed to other parties. If this capitation rate notification document is made available to third parties, then this capitation rate notification document and the original rate certification along with any amendments should be provided in their entirety. Any third party reviewing this capitation rate notification document and capitation rate certifications should be familiar with the AHCCCS Medicaid managed care program, the provisions of 42 CFR Part 438 of 81 FR 27497 applicable to this rate certification, the 2021 Medicaid Managed Care Rate Development Guide (2021 Guide), Actuarial Standards of Practice and generally accepted actuarial principles and practices.

CMS has yet to release a rate development guide for capitation rate updates related to payments under § 438.6(c). However, the 2021 Guide, the rate development guide used in the original CYE 21 capitation rate setting, included directed payment sections under Section I.4.D. which AHCCCS addressed in the capitation rate certifications and is including again in this capitation rate notification document to address the incorporation of the directed payment into the rate certification’s rate cells consistent with the distribution methodology described in the original capitation rate certification.

In lieu of having an official guide to follow, AHCCCS will follow the 2021 Guide for organizing this capitation rate notification document. Sections of the 2021 Guide that do not apply will be marked as “Not Applicable” and will be included in this rate update document for completeness.

CYE 21 ALTCS/EPD Program Capitation Rate Notification Document – Nursing Facility Supplemental Payments

Section I Medicaid Managed Care Rates

I.1. General Information

Not applicable to the NF-SP for the CYE 21 ALTCS/EPD Program rate update.

I.2. Data

Not applicable to the NF-SP for the CYE 21 ALTCS/EPD Program rate update.

I.3. Projected Benefit Costs and Trends

Not applicable to the NF-SP for the CYE 21 ALTCS/EPD Program rate update.

I.4. Special Contract Provisions Related to Payment

I.4.A. Incentive Arrangements

Not applicable to the NF-SP for the CYE 21 ALTCS/EPD Program rate update.

I.4.B. Withhold Arrangements

Not applicable to the NF-SP for the CYE 21 ALTCS/EPD Program rate update.

I.4.C. Risk-Sharing Mechanisms

Not applicable to the NF-SP for the CYE 21 ALTCS/EPD Program rate update.

I.4.D. Delivery System and Provider Payment Initiatives

I.4.D.i. Rate Development Standards

This section of the 2021 Guide provides information on delivery system and provider payment initiatives authorized under 42 CFR § 438.6(c).

I.4.D.ii. Appropriate Documentation

The following sections of the 2021 Guide, Section I.4.D.ii.(a)(i) through Section I.4.D.ii.(a)(iii), were provided in the CYE 21 ALTCS/EPD Program Capitation Rate Certification as signed by Jill S. Herbold on November 13, 2020. These sections are being provided again to facilitate CMS' review, updated as necessary to indicate completion of the specified payments.

I.4.D.ii.(a) Description of Delivery System and Provider Payment Initiatives

I.4.D.ii.(a)(i) Type and Description of Directed Payment Arrangements

AHCCCS seeks to provide enhanced support to nursing facilities in order to preserve access to these providers who deliver essential services to Medicaid recipients in Arizona. Contractors will provide a uniform dollar increase across all Contractors' reported nursing facility Medicaid bed days to network providers that provide nursing facility services. The increase is intended to supplement, not supplant, payments to eligible providers.

I.4.D.ii.(a)(ii) Directed Payments Incorporated in Capitation Rates

Not applicable to the NF-SP for the CYE 21 ALTCS/EPD Program rate update.

CYE 21 ALTCS/EPD Program Capitation Rate Notification Document – Nursing Facility Supplemental Payments

I.4.D.ii.(a)(iii) Directed Payments Under Separate Payment Arrangement

The NF-SP were not included in the ALTCS/EPD certified capitation rates and have been paid out via lump sum payments.

I.4.D.ii.(a)(iii)(A) Aggregate Amount

The original estimates of anticipated total payments for NF-SP were approximately \$104.1 million, inclusive of premium tax. Of that total, approximately \$95.7 million were anticipated to be paid through ALTCS/EPD Contractors, and the remainder is paid on a fee-for-service basis outside ALTCS/EPD. AHCCCS distributed the supplemental payments in the form of quarterly lump sum payments to the Contractors. Quarterly lump sum payments are based on the current available funds in the nursing facility assessment fund plus FMAP at the time of payment. The total payments paid through the ALTCS/EPD Contractors for the NF-SP were \$118.9 million, inclusive of premium tax.

I.4.D.ii.(a)(iii)(B) Actuarial Certification of the Amount of the Separate Payment Term

The actuary certified to the aggregate directed payment estimates as actuarially sound according to 42 CFR § 438.4 in the original rate certification. These original estimates were based on projections of future events. This notification document is to provide the actual final payments in total and by rate cell which the AHCCCS actuaries certify as actuarially sound according to 42 CFR § 438.4.

I.4.D.ii.(a)(iii)(C) Providers Receiving Payment

The qualifying providers receiving the payments include nursing facilities who deliver essential services to ALTCS/EPD enrollees.

I.4.D.ii.(a)(iii)(D) Distribution Methodology

The distribution methodology for NF-SP is unchanged from the original capitation rate certification. The distribution is based on each facility's proportion of Medicaid resident bed days to total nursing facility Medicaid resident bed days for the most recent and complete contract year (i.e. CYE 19 for CYE 21 NF-SP). The distribution methodology for CYE 21 therefore used CYE 19 approved encounter data to allocate the CYE 21 NF-SP by capitation rate cell. The encounter data for this allocation included: nursing facility providers that maintain eligibility for NF-SP, relevant claim health plan information, relevant rate cell information, and counts of accommodation days. The AHCCCS DHCM Actuarial Team excluded FFS utilization from the development of the payments to ALTCS/EPD Program Contractors. After all exclusions, a payment for each ALTCS/EPD Program Contractor, including an adjustment for premium tax, were developed each quarter.

The payments have been allocated by rate cells using the same encounter data listed above which had all relevant rate cell information included. The allocation of payments by Contractor will be driven by the percentage of total accommodation days that are assigned to each Contractor. Each payment amount for CYE 21 NF-SP was developed by using CYE 19 encounter data. Each quarterly payment was paid based on the available funds in the nursing facility assessment fund plus FMAP at the time of the payment.

CYE 21 ALTCS/EPD Program Capitation Rate Notification Document – Nursing Facility Supplemental Payments

I.4.D.ii.(a)(iii)(E) Estimated Impact by Rate Cell

Appendix 1 shows the total dollars paid including premium tax by rate cell. Appendix 2 shows the payments by rate cell incorporated into the capitation rates as PMPMs.

I.4.D.ii.(a)(iii)(F) Pre-Print Acknowledgement

These payments are being made under the approved NF-SP §438.6(c) payment arrangement in a manner consistent with the pre-prints approved by CMS (inclusive of any/all correspondence between the state and CMS regarding the pre-print).

I.4.D.ii.(a)(iii)(G) Future Documentation Requirements

AHCCCS is submitting this notification document to CMS which incorporates the total amount of the NF-SP payments into the rate certification's rate cells, consistent with the distribution methodology described in Section I.4.D.ii.(a)(iii)(D). The capitation rates with and without the NF-SP can be found in Appendix 2.

I.4.E. Pass-Through Payments

Not applicable to the NF-SP for the CYE 21 ALTCS/EPD Program rate update.

I.5. Projected Non-Benefit Costs

Not applicable to the NF-SP for the CYE 21 ALTCS/EPD Program rate update.

I.6. Risk Adjustment and Acuity Adjustments

Not applicable to the NF-SP for the CYE 21 ALTCS/EPD Program rate update.

Section II Medicaid Managed Care Rates with Long-Term Services and Supports

Not applicable to the NF-SP for the CYE 21 ALTCS/EPD Program rate update.

Section III New Adult Group Capitation Rates

Not applicable to the NF-SP for the CYE 21 ALTCS/EPD Program rate update.

CYE 21 ALTCS/EPD Program Capitation Rate Notification Document – Nursing Facility Supplemental Payments

Appendix 1: CYE 21 NF-SP Payments

Rate Cell	Contractor	GSA	CYE 21 NF-SP Dollars including Premium Tax
Dual	UHC-LTC	North	\$8,552,354
Dual	Banner-UFC	South	\$12,946,157
Dual	Mercy Care	South	\$10,316,856
Dual	UHC-LTC	Central	\$19,625,971
Dual	Banner-UFC	Central	\$11,791,456
Dual	Mercy Care	Central	\$30,534,112
Non-Dual	UHC-LTC	North	\$1,063,089
Non-Dual	Banner-UFC	South	\$2,503,020
Non-Dual	Mercy Care	South	\$2,098,610
Non-Dual	UHC-LTC	Central	\$5,253,184
Non-Dual	Banner-UFC	Central	\$2,988,966
Non-Dual	Mercy Care	Central	\$11,229,815
Total			\$118,903,592

CYE 21 ALTCS/EPD Program Capitation Rate Notification Document – Nursing Facility Supplemental Payments

Appendix 2: CYE 21 Certified and Adjusted Capitation Rates

Rate Cell	Contractor	GSA	Certified Capitation Rate 10/1/20 - 9/30/21	NF Enhanced Payments PMPM	Adjusted Capitation Rate 10/1/20 - 9/30/21
Dual	UHC-LTC	North	\$3,206.26	\$287.80	\$3,494.06
Dual	Banner-UFC	South	\$3,611.44	\$301.31	\$3,912.75
Dual	Mercy Care	South	\$3,492.98	\$385.26	\$3,878.24
Dual	UHC-LTC	Central	\$3,155.60	\$276.01	\$3,431.61
Dual	Banner-UFC	Central	\$3,924.44	\$455.39	\$4,379.83
Dual	Mercy Care	Central	\$3,858.38	\$312.07	\$4,170.45
Non-Dual	UHC-LTC	North	\$6,597.56	\$260.00	\$6,857.56
Non-Dual	Banner-UFC	South	\$7,163.26	\$378.29	\$7,541.55
Non-Dual	Mercy Care	South	\$7,517.19	\$443.99	\$7,961.18
Non-Dual	UHC-LTC	Central	\$7,868.00	\$466.08	\$8,334.08
Non-Dual	Banner-UFC	Central	\$8,918.38	\$631.79	\$9,550.17
Non-Dual	Mercy Care	Central	\$8,353.59	\$442.06	\$8,795.65

Notes:

- 1) Certified capitation rates do not include flu vaccine gift card PMPMs which are subject to administrative FMAP.