

## YH22-0009 Attachment C: AHCCCS List of Systems

The systems to be assessed include the following plus any associated integration, utility, or otherwise dependent systems or technologies.

<u>Name of System</u>	<u>Purpose</u>
1. ALTCS Medical Eligibility (CATS)	Provides a mechanism for capture and tracking specific service level needs data and authorizations for a select medically eligible group of members
2. Case Management	Provides a mechanism for call tracking (member and provider) maintaining a history of information viewed and responses provided.
3. Claims	Maintains FFS population, and contracted TPA population claims processing and payments, prior authorization and medical review.
4. Data Warehouse	A data management system that is designed to enable and support business intelligence (BI) activities, especially analytics. The data warehouse centralizes and consolidates large amounts of data from multiple sources. Its analytical capabilities allow AHCCCS to derive valuable business insights from their data to improve decision-making.
5. EDI (Electronic Data Exchange)	Provides integration between modules, integration with outside systems and API functionality for WEB tier.
6. Eligibility & Enrollment (HEAplus, KOLEA) determination systems	<p>HEAplus is a web-based system that provides portals for consumers, eligibility workers, and community assistants and supports eligibility determinations and ongoing case management for State programs, including: Medicaid, CHIP, SNAP, TANF, Medicare Savings Program (MSP), Arizona Long-Term Care System (ALTCS), and Arizona's MyFamilyBenefits (Electronic Benefits Transfer [EBT] Portal)</p> <p>KOLEA is Hawaii's eligibility system.</p>
7. Eligibility Quality Control/Fraud	Quality control data request that pulls statistical information to third-party application
8. Encounters	Maintains MCO enrolled population adjudicated claims processing results for each MCO
9. EVV (Electronic Visit Verification - vendor System)	Electronically captured and verifies the EVV defined type of service performed, Individual receiving the service, Date of the service, Location of service delivery, Individual providing the service and the Time the service begins and ends

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<u>Name of System</u>	<u>Purpose</u>
10. Provider	Maintains registered provider enrollment and participation information both current and historical.
10a. Provider Enrollment (vendor system)	Facilitates entry and update of provider information and provides validation of these entries.
11. Health Plan	Maintains contracted MCOs current and historical contracting information including demographics, contracted geographical service areas (GSA's), capitation rates, etc.
12. Information Management	Generates interface data for DW use.
13. Finance	Provides a data bridge from Claims processing systems to the State Financial data systems.
14. Recipient	Maintains eligible members current and historical including enrollment, demographics, etc.
15. Reference	House's tables/files containing codes, values and processing rules used by other PMMIS systems
16. Reinsurance	AZ is self-insured for Reinsurance purposes. Maintains MCO eligible cost threshold based and/or catastrophic reinsurance cases and related encounters.
17. Security	Maintains and controls who can access which PMMIS transactions/functions and what they can do within those transactions/functions.
18. SVES - WTPY Request/Response	DMPS uses to request WTPY SSN verifications
19. System Service Request	Maintains and tracks requests for research, corrections and enhancements completed by ISD to PMMIS and other systems
<b>Other Systems</b>	
<u>Name of System</u>	<u>Purpose</u>
OIG Data Analytics Tool	Vendor System to investigate possible fraud through use of algorithmic analysis
WEB Portals	Provider, Member, QM
DUGless	Used to capture social determinant/demographic/outcome elements with no identified alternative data source or Social Determinate diagnosis identifier