

PROGRAM FACT SHEET

Arizona Health Care Cost Containment System

Division of Member Services

Services:

The Division provides the following services:

- 1 Determining eligibility for the Arizona Long Term Care System (ALTCs) and for other Supplemental Security Income Medical Assistance Only (SSI/MAO) programs, as well as for the Children's Health Insurance Title XXI Program called KidsCare;
- 2 Enrolling eligible acute care and ALTCs members and providing member eligibility and enrollment information;
- 3 Performing oversight of the Department of Economic Security's Medicaid eligibility determinations; and
- 4 Providing information to healthcare providers and AHCCCS members through its 24-hour Communications Center.

Facilities:

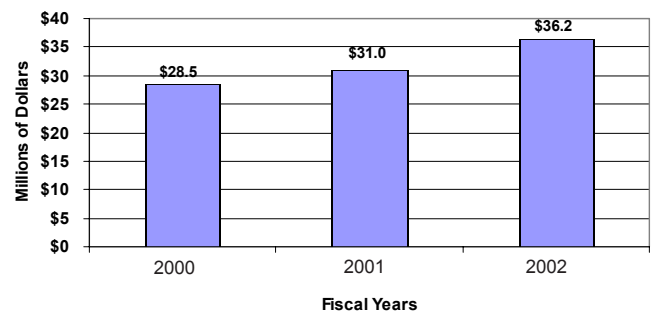
The Division performs its duties at two state-owned buildings located at 701 and 801 East Jefferson Street in Phoenix, Arizona, and at 18 leased field offices statewide. The total lease costs are approximately \$2.5 million annually.

Equipment:

The Division uses and owns standard equipment such as computers, copy machines, scanners, and fax machines. The Division owns 112 vehicles, including pickup trucks, sport utility vehicles, sedans, and vans. The Division's Communications Center also owns a phone system that allows calls to be routed to individual operators and tracks such information as number of calls waiting and caller wait times.

Program revenue:

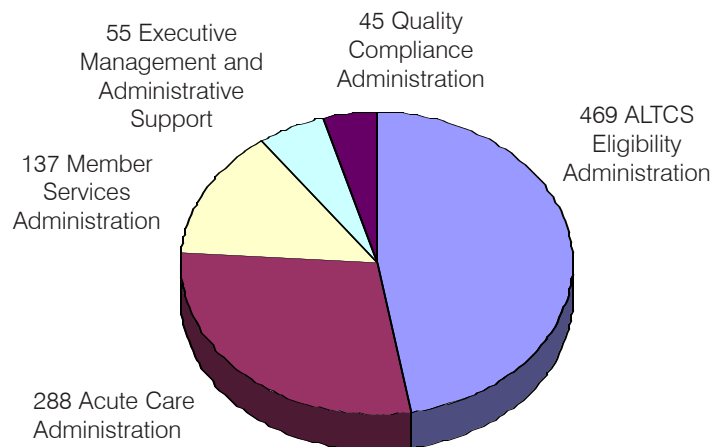
\$36.2 million (fiscal year 2002, estimated)¹



¹ The estimated fiscal year 2002 program revenue includes \$1.2 million in funding from the Tobacco Settlement Litigation Fund to help administer the increased workload that resulted from Proposition 204, approved by voters in November 2000, which expanded criteria for medical coverage eligibility.

Program staffing:

994 approved FTE (nearly 45 percent of which determine eligibility statewide)



Division Mission

To assist AHCCCS-eligible members in accessing healthcare.

Division goals:

1. To administer eligibility processes for ALTCS, KidsCare, SSI/MAO, and four Medicare Cost-Sharing Programs in a timely manner.
2. To determine eligibility in an accurate manner.
3. To ensure that member information in the recipient database is accurate and updated in a timely manner.
4. To provide accurate eligibility and enrollment information to providers and members in a timely manner.
5. To ensure compliance with federal Medicaid Eligibility Quality Control requirements.

Adequacy of goals and performance measures:

The Division of Member Services' 5 goals appear to be appropriate for its mission, and it has established 16 performance measures that correlate to its goals. A review of the Division's performance measures finds that the Division has established measures that adequately convey its performance in each of its primary areas of responsibility: conducting timely and accurate eligibility determinations, providing information through its Communications Center, maintaining a database of member information, and ensuring compliance with certain federal requirements.