



INTERGOVERNMENTAL AGREEMENT (IGA) AMENDMENT

1. AMENDMENT #: 5	2. AGREEMENT #: YH16-0018-09	3. EFFECTIVE DATE OF AMENDMENT: JANUARY 1, 2023	4. PROGRAM: DFSM / DMPS
5. CONTRACTOR/PROVIDER NAME AND ADDRESS: <p style="text-align: center;">Pinal County 31 North Pinal Street P.O. Box 827 Florence, AZ 85132</p>			
6. PURPOSE: To extend the agreement and revise the rates for SFY23.			

7. THE ABOVE REFERENCED AGREEMENT IS HEREBY AMENDED AS FOLLOWS:

- A. Pursuant to Section 3, Term, this agreement is hereby extended for an additional five-year term effective January 1, 2023 to December 31, 2028.
- B. Pursuant to Section 4.4., AHCCCS Rights and Obligations, Subsection 4.4.1, Eligibility Decision 4.4.1.1, Attachment A, Administrative Annual Cost Estimates for Pinal County, is hereby incorporated for SFY23.
- C. Pursuant to Section 4.5, County's Rights and Obligation, Subsection 4.5.2, Advance Payment for Medical Services and Administrative Costs by the County, Attachment B, Quarterly Estimate of State Match Advance Payments, is hereby incorporated for SFY23.

EXCEPT AS PROVIDED FOR HEREIN, ALL TERMS AND CONDITIONS OF THE ORIGINAL AGREEMENT NOT HERETOFORE CHANGED AND/OR AMENDED REMAIN UNCHANGED AND IN FULL EFFECT.

Electronic Submission: An electronic or portable document file (PDF) copy of this amendment shall serve as the original.

IN WITNESS THEREOF, the parties have executed this Agreement:

COUNTY: Pinal

Arizona Health Care Cost Containment
System (AHCCCS):

Signature: _____

Signature:  _____
Meggan LaPorte (Oct 5, 2022 09:36 PDT)

Printed Name: Jeffrey McClure

Printed Name: Meggan LaPorte, CPPO, MSW

Title: Chairman
County Board of Supervisors

Title: Chief Procurement Officer

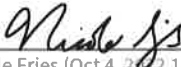
Date: 11/02/2022

Date: Oct 5, 2022

In accordance with A.R.S. § 11-952, this Agreement has been reviewed by the undersigned who has determined that this Agreement is in the appropriate form and is within the power and authority granted to COUNTY.

COUNTY Attorney

In accordance with A.R.S. § 11-952, this Agreement is in the proper form and is within the power and authority granted to AHCCCS under A.R.S. §§ 36-2903 et seq. and 36-2932 et seq.



Nicole Fries (Oct 4, 2022 14:51 PDT)

Nicole Fries, Associate General Counsel for
AHCCCS

AHCCCS
Administrative Annual Cost Estimates for
Pinal County Medicaid Eligible Inmates FFSV Project IGA SFY23

Claims		Electronic 73%	Paper 28%	Total Fund 100%	State Share 50%	Federal Share 50%
Estimated total number of claims:						
Physician & Emergency Transport/Hospital	1	145	55	200		
DFSM Cost per Claim	2	\$ 0.78	\$ 0.90			
DMPS Provider Enrollment Cost per Claim	2	\$ 0.17	\$ 0.17			
ISD Cost per Claim	2	\$ 1.91	\$ 1.91			
		Average				
		Cost				
Concurrent Review						
Estimated cost per case	3	\$ 127.95				
Estimated number of HSAG reviews	4	2				
Claims Processing costs:						
DFSM		\$113.03	\$49.55	\$162.58	\$81.29	\$81.29
DMPS Provider Enrollment		\$25.10	\$9.52	\$34.62	\$17.31	\$17.31
ISD		\$276.53	\$104.89	\$381.42	\$190.71	\$190.71
State Accounting System Charges @ \$0.2336/claim		\$33.88	\$10.86	\$44.74	\$22.37	\$22.37
Total Claims Processing Costs		\$448.54	\$174.82	\$623.36	\$311.68	\$311.68
Direct DFSM Labor for Pinal Co Medicaid Inmate Claims Processing	5			-	\$0.00	\$0.00
Direct ISD Labor for Pinal Co Medicaid Inmate Claims Processing	6			\$1,750.00	\$875.00	\$875.00
Concurrent Review Estimated costs:						
Cost for 10 reviews				\$255.90	\$127.95	\$127.95

Administrative Costs (see detail)

DBF Paper Processing Personnel costs	7	\$ 8,880.84	\$4,440.42	\$4,440.42
Postage @ \$.0820/claim	8	\$16.40	\$8.20	\$8.20
Data Center Charges @ \$.7717/claim	9	\$154.34	\$77.17	\$77.17
OOD @ \$.3524/claim		\$70.50	\$35.25	\$35.25
OGC @ \$.0977/claim		\$19.54	\$9.77	\$9.77
HRD @ \$.0299/claim		\$5.96	\$2.98	\$2.98
TIBCO @ \$.1349/claim		\$27.00	\$13.50	\$13.50
Indirect at 10%		\$917.46	\$458.73	\$458.73
Total Administrative Costs		\$ 10,092.04	\$5,046.02	\$5,046.02

DMPS Eligibility Costs

Application Processing Costs - DMPS	10	\$1,050.00	\$525.00	\$525.00
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Estimated Total Annual Costs for Program

\$13,771.28	\$6,885.64	\$6,885.64
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Cost per Claim

\$67.58	\$33.79	\$33.79
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¹ Actual number of claims may be higher. Number includes, original, recoupment and adjustment claims.

² Cost based on actual expenditures and actual number of claims processed

³ Average rate per contract. Actual costs will be a strict pass-through based on price negotiated on contract.

⁴ Actual number may be higher or lower depending on Pinal Co Medicaid Inmate program requirements.

⁵ Based on estimates of DFSM staff time required to process the claims.

⁶ Estimate based on 10 hours at a rate of \$175 per hour. Will only be billed for actual hours incurred.

⁷ Based on estimates of DBF staff time required to monitor funding activity and process payments.

⁸ Postage based on average cost per claim times number of claims.

⁹ Data Center charges calculated based on average costs

¹⁰ DMPS Eligibility charges calculated at \$105/determination. Estimated 10 annual applications/determinations.

AHCCCS
Quarterly Estimate of State Match Advance Payments for Program Services
Pinal County Medicaid Eligible FFSV Project IGA SFY23

Estimate of Annual Dollar Value of Claims Paid	\$	200,000.00
Average Federal Financial Participation Rate		81.39%
Estimate of State Match Payments for Program Services for Current Year	\$	37,220.00
Quarterly Estimate of State Match Advance Payments for Program Services to AHCCCS	\$	<u>10,000.00</u> **

** Minimum Balance of \$10,000.00 must be maintained.