

**ACOM POLICY 432, ATTACHMENT A,
MATRIX OF FINANCIAL RESPONSIBILITY BY RESPONSIBLE PARTY**

SERVICE/RESPONSIBILITY		ACUTE CARE CONTRACT OR ¹	RBHA	TRBH A	CRS FULLY INTEGRATED ²	CRS PARTIALLY INTEGRATED BH ³	CRS PARTIALLY INTEGRATED ACUTE ⁴	CRS ONLY ⁵	DDD	CMDP	AIHP
THE ENROLLED ENTITY IS RESPONSIBLE FOR:											
1.	Reimbursement of transportation for the member to the initial behavioral health appointment regardless of whether the Enrolled Entity or the Behavioral Health Entity scheduled that appointment.	X	X For members determined to have SMI who are integrated ⁶		X		X		X	X	X

¹ Removed column – no longer applicable for 10-1-18

² Removed column – no longer applicable for 10-1-18

³ Removed column – no longer applicable for 10-1-18

⁴ Removed column – no longer applicable for 10-1-18

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⁶ Distinction no longer necessary in policy – changed for all

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THE ENROLLED ENTITY IS RESPONSIBLE FOR:											
2.	Reimbursement of transportation for the member to the emergency department of an acute care hospital when the transport is emergent, including inter-facility transfers to the emergency department.	X	X For members determined to have SMI who are integrated		X		X		X	X	X

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THE ENROLLED ENTITY IS RESPONSIBLE FOR:											
3.	<p>Reimbursement of claims with behavioral health principal diagnoses that are related to communication disorders usually diagnosed in infancy, childhood or adolescence. The claim must be accompanied by procedure codes ranging from -92507, 92508, 92521-92524, and 92550-92597.</p> <p>These behavioral health conditions require services from non-behavioral health provider types such as speech therapists or other physical health providers, and are therefore considered physical health services.</p>	X	X For members determined to have SMI who are integrated		X		X	X	X	X	

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THE ENROLLED ENTITY IS RESPONSIBLE FOR:										
4.	Reimbursement of Occupational Therapy claims regardless of principal diagnosis.							X	X	X

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THE ENROLLED ENTITY IS RESPONSIBLE FOR:											
5.	Reimbursement of all <i>facility services</i> , including triage and diagnostic tests, regardless of principal diagnosis when provided in an emergency department and there is no admission to the facility.	X	X For members determined to have SMI who are integrated		X	X For a CRS related condition	X	X For a CRS related condition	X	X	X
6.	Reimbursement of <i>professional fees</i> with a physical health principal diagnosis , regardless of setting.	X	X For members determined to have SMI who are integrated		X	X For a CRS related condition	X	X For a CRS related condition	X	X	X

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THE ENROLLED ENTITY IS RESPONSIBLE FOR:											
7.	Reimbursement of services associated with a PCP visit for diagnosis and treatment of anxiety, depression, Medication Assisted Treatment (MAT) for Opioid Use Disorder and/or attention deficit hyperactive disorder including <i>professional fees</i> , related prescriptions, laboratory and other diagnostic tests. For purposes of medication management, it is not required that the PCP be the member's assigned PCP.	X	X For members determined to have SMI who are integrated		X		X		X	X	X

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THE ENROLLED ENTITY IS RESPONSIBLE FOR:											
8.	Reimbursement of inpatient <i>facility services</i> to hospitalized members with a principal physical health diagnosis. Reimbursement is unrelated to the bed or floor where the member is placed.	X	X For members determined to have SMI who are integrated		X	X For a CRS related condition	X	X For a CRS related condition	X	X	X
9.	When the enrolled entity is AHCCCS FFS for AIHP members assigned to a RBHA or TRBHA, payment of medically necessary transportation services (emergent and non-emergent) when the diagnosis code on the claim is unspecified (799.9 or its replacement code under ICD-10).										X

[END OF ENROLLED ENTITY RESPONSIBLE PARTY SECTION]

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THE BEHAVIORAL HEALTH ENTITY IS RESPONSIBLE FOR:											
10.	Reimbursement of inpatient <i>facility services</i> to hospitalized members with a behavioral health principal diagnosis. Reimbursement is unrelated to the bed or floor where the member is placed.	X For GMH/SA Adult Duals¹²	X	X	X	X					

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^{9 9} Removed column – no longer applicable for 10-1-18

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THE BEHAVIORAL HEALTH ENTITY IS RESPONSIBLE FOR:											
11.	Reimbursement of professional fees with a behavioral health principal diagnosis , regardless of setting including, but not limited to, diagnosis and treatment of depression, anxiety and/or attention deficit hyperactive disorder <u>except when depression, anxiety and/or attention deficit hyperactive disorder treatment is provided by a PCP.</u>	X For GMH/SA Adult Duals	X	X	X	X					

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THE BEHAVIORAL HEALTH ENTITY IS RESPONSIBLE FOR:											
12.	Reimbursement of medically necessary transportation when transferring a member from an Acute Hospital, including an Emergency Department, to a Behavioral Health setting including but not limited to, a Residential Treatment Center (RTC), Outpatient Clinic or a Residential Facility.	X For GMH/SA Adult Duals	X	X	X	X					

[END OF BEHAVIORAL HEALTH ENTITY RESPONSIBLE PARTY SECTION]