

DATE:	September 04, 2019
то:	Holders of the AHCCCS Contractor Operations Manual
FROM:	Division of Health Care Management Contracts and Policy Unit
SUBJECT:	AHCCCS Contractor Operations Manual (ACOM)

This memo describes revisions and/or additions to the ACOM.

Please direct questions regarding policy updates to the Contracts and Policy Unit at 602-417-4295 or 602-417-4055 or email at <u>DHCMContractsandPolicy@azahcccs.gov</u>.

UPDATES AND REVISIONS TO THE AHCCCS CONTRACTOR OPERATIONS MANUAL (ACOM)

To view the policies and attachments, please access the following link:

AHCCCS CONTRACTOR OPERATIONS MANUAL (ACOM)

ACOM POLICY 305, PERFORMANCE BOND AND EQUITY PER MEMBER REQUIREMENTS

ACOM Policy 305 was revised to align with AHCCCS Complete Care (ACC) Contract Integration changes (RFP YH19-0001) and for general minor formatting updates. A new definition for 'Terminated Contractor' and a new section 'Performance Bond Requirement for Terminated Contractor' was added for clarification. There were additional Post Tribal Consultation Notification/Public Comment Change noted below. *Policy has a retroactive date of 10/01/18.*

- <u>ATTACHMENT A, PERFORMANCE BOND ANNUAL ATTESTATION</u>
 New Attachment A has been added in a fillable PDF fomat and is to be utilized as a legal document.
- <u>ATTACHMENT B, PERFORMANCE BOND FORM</u>
 New Attachment B has been added in a fillable PDF fomat and is to be utilized as a legal document.
- ATTACHMENT C, INSTRUCTIONS FOR WIRE/ACH TRANSFERS OF FUNDS TO AHCCCS VIA ARIZONA STATE TREASURER

Attachment C was formerly titled as Attachment A.



POST TRIBAL CONSULTATION NOTIFICATION/PUBLIC COMMENT CHANGES:

Section II. Definitions has been updated as follows:

QUALIFYING CASH SWEEP ARRANGEMENT	An arrangement where cash that exceeds a set threshold is swept on a regular basis (typically daily) into a highly liquid interest-bearing investment account. The entity managing the sweep account must maintain an accounting system that permits separate accounting of amounts held for each AHCCCS Arizona Medicaid, including the Non-Title XIX/XXI Contract, (hereafter AHCCCS for the purposes of this definition) line of business. Cash held in a sweep account, including any interest earned on that cash, must be available to each AHCCCS line of business within 24 hours of the request. The amount held in the sweep account must be sufficient to meet the needs of all AHCCCS lines of business if the cash is requested by all AHCCCS lines of business simultaneously.
QUALIFYING CENTRALIZED CASH ARRANGEMENT	The consolidation of cash flow decisions within a company to a central authority for the purposes of achieving greater control of intra-company cash balances. These arrangements only qualify when the arrangement is: (1) between AHCCCS Arizona Medicaid, including the Non-Title XIX/XXI Contract, (hereafter AHCCCS for the purposes of this definition) lines of business when one Contractor is the named party to contracts for multiple AHCCCS lines of business or (2) between multiple AHCCCS Contractors with a common ownership. The entity responsible for the centralized cash management must be an AHCCCS Contractor. A parent company may not be the entity responsible for centralized cash management unless the parent company is also an AHCCCS Contractor for at least one AHCCCS line of business. A qualifying centralized cash arrangement may not consolidate non-AHCCCS lines of business with non-AHCCCS lines of business.

Section III., D., 1., & 2., 'Restrictions on Equity' has been updated as follows:

D. RESTRICTIONS ON EQUITY

The following asset types will constitute restricted assets, and therefore will be subtracted from a contractor's equity when calculating the equity per member ratio:



Assets recorded as "due from affiliates." Assets recorded as "due from affiliates" are restricted assets, and therefore will be excluded from a contractor's equity when calculating the equity per member ratio except for:

 a. the portion of the due from affiliates balance resulting from AHCCCS approved Qualifying Cash Sweep Arrangement, and/or
 b. the portion of the due from affiliates balance resulting from AHCCCS approved Qualifying Centralized Cash Arrangement.

To obtain a waiver, the Contractor shall, on an annual basis, provide AHCCCS a copy of the sweep agreements and corporate cash policy and any other documents requested by AHCCCS. The Contractor may be required to provide monthly cash reconciliations, and/or bank statements, and an accounting of any applicable interest earned as a result of the arrangement. may request a waiver from AHCCCS to include the prorated portion of the due from affiliates balance resulting from AHCCCS approved cash/bank account sweep arrangements with other AHCCCS lines of business.

 All intangible assets, including but not limited to goodwill and adjustments to other assets resulting from a purchase, including those resulting from purchases and revaluations recorded in accordance with Financial Accounting Standards Board (FASB) Accounting Standards Codification Topic 105 - Generally Accepted Accounting Principles and FASB Accounting Standards Codification Topic 350 -Intangibles — Goodwill and Other.

ACOM POLICY 447, EMPLOYMENT

ACOM 447 is a new policy that establishes standards and requirements for the delivery of employment services. There were additional Post Tribal Consultation Notification/Public Comment Change noted below.

- ATTACHMENT A, PSYCHIATRIC REHABILITATION PROGRESS REPORT SPECIFICATIONS FOR RBHA/SMI Attachment A is a new attachment and serves as a deliverable template. There were additional Post Tribal Consultation Notification/Public Comment Change noted below.
- ATTACHMENT B, PSYCHIATRIC REHABILITATION PROGRESS REPORT SPECIFICATIONS FOR GMH/SU Attachment B is a new attachment and serves as a deliverable template. There were additional Post Tribal Consultation Notification/Public Comment Change noted below.



POST TRIBAL CONSULTATION NOTIFICATION/PUBLIC COMMENT CHANGES:

Section II. Definitions has been updated as follows:

GROUP	A service that provides a group of members with on-site			
SUPPORTED	supervision and support in an integrated paid work			
EMPLOYMENT (GSE)	environment within the community.			

INTERAGENCYFor purposes of this Policy, ISA refers to the agreementSERVICE AGREEMENT (ISA)between the Arizona Department of Economic Security (ADES)
and the Arizona Health Care Cost Containment System
(AHCCCS) for members that are determined SMI with an SMI
determination.

Section III., Policy has been updated as follows:

AHCCCS believes that every person **has the capacity to work** competitively in the community when the right kind of job and work environment is identified and supports are present. The Contractor shall apply this philosophy of empowerment and opportunity through the implementation of employment programs, measurement of outcomes, and communication with all subcontracted staff, not just employment staff. Employment-related initiatives may be created through the collaboration of AHCCCS and the Contractors.

Section III., A., 1., 2., 3., 4., have been updated as follows:

- 1. Employment is the first and preferred daily outcome for all working aged Arizonans who have disabilities.
- 2. Members with disabilities will have access to integrated work settings. Eligible members with disabilities will have access to integrated work settings most appropriate for him/her, including the supports necessary to be successful in the workplace.
- 3. Members receive information to help them make informed decisions about employment, including, but not limited to, the following:
 - a. Employment supports and services,
 - **b.** Knowledge about the value of employment on their quality of life, and Knowledge about the potential impact of employment on their quality of life and
 - c. Understanding of how work affects public benefits and resources so that employment remains an option to the member without fear of losing essential benefits.



4. Long-term supports and services, if needed, are made available for members to be successful in the workplace. Employment First does not limit the ability of a person who has a disability to select an employment option that they determine to be the best option for themselves.

Section III., B., 2., b, has been updated as follows:

b. ISA Requirements

AHCCCS and ADES/RSA have an ISA in place to provide specialty employment supports for members determined with a Serious Mental Illness (SMI) *determination*. Through this ISA, RBHAs and RSA's Vocational Rehabilitation program work collaboratively with the ultimate goal of increasing the number of employed members who are successful and satisfied with their vocational roles. Specialty employment supports include:

Section III., C., has been updated as follows:

C. ACC/RBHA CONTRACTOR MONITORING REQUIREMENTS

Section III., E., 1., has been updated as follows:

E. ACC/RBHA WORKFORCE COMPETENCIES

The Contractor is responsible for providing technical assistance to its provider network to ensure a competent workforce as outlined in this section. For more information about *Workforce Competencies* training, coaching, supervision, and mentoring components, refer to ACOM Policy 407.

- The Contractor shall ensure that all subcontracted providers offer have access to the AHCCCS standardized employment module of the New Employee Orientation (NEO) Training.
 - a. The Contractor shall ensure that all *new* subcontracted employees complete the standardized employment module and achieve a passing grade of at least 80% on the post-assessment. Employees may complete the training multiple times in order to achieve this passing grade.
 - b. The NEO Training is available through the single Learning Management System jointly contracted with the Contractors.

Section III., E., b., c., d., have been updated as follows:

- b. AMPM Policy 310-B and AHCCCS B2-Matrix Behavioral Health Services Matrix
 - i. Correctly bill for employment services



- c. Disability Benefits 101 (AZ DB101) www.AZ.DB101.org
 - i. For employment staff, create an active, personal AZ DB101 account and assist members in creating their own AZ DB101 accounts,
 - ii. For employment staff, complete AZ DB101 calculator estimator sessions (full versions and quick estimates) with members to show how medical and financial benefits will be impacted with employment earnings. This includes the following:
 - 1. Accurately interpreting and analyzing results with members who may require an extra level of understanding and possible assistance in accessing the different types of Social Security and/or AHCCCS work incentives.
- d. RSA/VR
 - i. Refer members with disabilities interested in employment to the RSA/VR program, including education about and supporting members to make informed decisions about RSA/VR,
 - ii. For employment staff, knowledge of eligibility criteria, OOS, and VR status codes when meeting with members and/or RSA/VR staff,
- iii. For members who apply for the RSA/VR program, but are placed on a waitlist because of the OOS due to a limited number of functional limitations, or decline participation in the RSA/VR program, provide the necessary employment supports and services to assist those members in achieving their employment goals. This includes assisting members to request a redetermination of the OOS when additional information is provided regarding disability-related barriers, and
- iv. For Contractors serving members determined to have with a Serious Mental Illness (SMI) determination, the dedicated employment/rehabilitation provider staff's job description shall be consistent with the parameters outlined in the Statewide Collaborative Protocols.

POST TRIBAL CONSULTATION NOTIFICATION/PUBLIC COMMENT CHANGES FOR ATTACHMENT A, PSYCHIATRIC REHABILITATION PROGRESS REPORT SPECIFICATIONS FOR RBHA/SMI:

Section C., 1., has been updated as follows:

1. <u>New Employee Orientation Training (NEO)</u>

Contractors and all subcontracted providers *shall have access to* offer the AHCCCS standardized employment module of the NEO, as well as ensure that all *new* subcontracted employees complete the standardized employment module and achieve a passing grade of at least 80% on the post-assessment. Employees may complete the training multiple times in order to achieve this passing grade. *The NEO Training is available through the single Learning Management System jointly contracted with the Contractors.*



Section C., 3., has been updated as follows:

3. AZ Disability Benefits 101 (AZ DB101)

Contractors shall ensure that subcontractors' employment staff are creating an active, personal AZ DB101 account; assisting members in creating their own AZ DB101 accounts; completing AZ DB101 *estimator* calculator sessions (full versions and quick estimates) with members; accurately interpreting and analyzing results with members who may require an extra level of understanding; and when necessary, assisting members in accessing the different types of Social Security and/or AHCCCS work incentives.

The Contractor shall provide an update on strategies the Contractor is utilizing to track subcontractor compliance in this area. Include any findings and actions taken stemming from those findings.

POST TRIBAL CONSULTATION NOTIFICATION/PUBLIC COMMENT CHANGES FOR ATTACHMENT B, PSYCHIATRIC REHABILITATION PROGRESS REPORT SPECIFICATIONS FOR GMH/SU:

Section A., has been updated as follows:

A. REFERRALS TO RSA/VR

Contractors shall track members being referred to RSA/VR, as reported by **providers** Health Homes. For the **providers** Health Homes, a "referral" means a referral packet was provided to RSA/VR for a member interested in pursuing the RSA/VR program. Utilize the following format for tracking referrals made to RSA/VR:

REFERRALS TO:	MONTH - YEAR	MONTH - YEAR	Month - Year	TOTAL
RSA/VR, AS				
REPORTED BY				
SUBCONTRACTED				
PROVIDER SITES				



Section C., 1., has been updated as follows:

- **C. WORKFORCE COMPETENCIES**
 - 1. New Employee Orientation Training (NEO)

Contractors and all subcontracted providers shall *have access to* offer the AHCCCS standardized employment module of the NEO, as well as ensure that all *new* subcontracted employees complete the standardized employment module and achieve a passing grade of at least 80% on the post-assessment. Employees may complete the training multiple times in order to achieve this passing grade. The NEO Training is available through the single Learning Management System jointly contracted with the Contractors.

Section C., 3., has been updated as follows:

3. AZ Disability Benefits 101 (AZ DB101)

Contractors shall ensure that subcontractors' employment staff are creating an active, personal AZ DB101 account; assisting members in creating their own AZ DB101 accounts; completing AZ DB101 *estimator* calculator sessions (full versions and quick estimates) with members; accurately interpreting and analyzing results with members who may require an extra level of understanding; and when necessary, assisting members in accessing the different types of Social Security and/or AHCCCS work incentives.

The Contractor shall provide an update on strategies the Contractor is utilizing to track subcontractor compliance in this area. Include any findings and actions taken stemming from those findings.

NEWLY ADDED TO APPROVED NOT YET EFFECTIVE

To view the policies and attachments, please access the following link:

ACOM APPROVED NOT YET EFFECTIVE

ACOM POLICY 406, MEMBER HANDBOOK AND PROVIDER DIRECTORY

ACOM Policy 406 was revised for general formatting and to align with DDD integration activities. Behavioral Health services for DDD members, including SMI services will now apply to DDD instead of the RBHAs. CFR references have been updated as well as language for DDD Subcontracted Health Plans.



• ATTACHMENT A, MEMBER HANDBOOK CHECKLIST

Attachment A was updated for minor grammar updates and to align with changes made in DDD Contract and address contractual changes in Non-Title XIX/XXI services. NOA timelines were added.

• ATTACHMENT B, DEFINITIONS FOR AHCCCS MEMBERS PURSUANT TO 42 CFR 438.10 No changes.

PREVIOUSLY ADDED TO APPROVED NOT YET EFFECTIVE To view the policies and attachments, please access the following link:

ACOM APPROVED NOT YET EFFECTIVE

ACOM Policy 404, Contractor Website and Member Information

ACOM Policy 404 was revised to include DDD where applicable due to 2019 behavioral health integration activities, including SMI language which will now apply to DDD. There were additional Post Tribal Consultation Notification/Public Comment Change noted below. Policy will have an implementation date of 10/01/19.

POST TRIBAL CONSULTATION NOTIFICATION/PUBLIC COMMENT CHANGES:

SECTION III., B. LANGUAGE, READABILITY AND ORAL INTERPRETATION REQUIREMENTS

Member information materials shall include the nondiscrimination notice mandated by 45 CFR 92.8 in 18 point font, translated in the prevalent non-English languages in the Contractor's service area. Materials shall also include taglines in 18 point font, of the top 15 Arizona LEP languages. Taglines shall All member information materials shall include taglines in the prevalent non-English languages in Arizona and include large print (font size of at least 18 point) explaining the availability of written translation or oral interpretation services with the Contractor's toll free and TTY/TDY telephone numbers for customer service which shall be available during normal business hours.

SECTION III., G., SUBMISSION, REQUIREMENTS, AND RESTRICTIONS FOR ALL OTHER MATERIALS

Section G., was re-structured for flow and brevity.

• ATTACHMENT A, ORGANIZATIONS RECOGNIZED BY AHCCCS

No changes. There were additional Post Tribal Consultation Notification/Public Comment Change noted below.



POST TRIBAL CONSULTATION NOTIFICATION/PUBLIC COMMENT CHANGES:

Attachment A was updated to include the following organizations: American Academy of Family Physicians, American Osteopathic Association, American Psychiatric Association, American Society of Addiction Medicine, Arizona Dental Association, Arizona Medical Association, and Arizona Osteopathic Medical Association.

- <u>ATTACHMENT B, CONTRACTOR WEBSITE CERTIFICATION CHECKLIST</u>
 Attachment B was revised for general formatting updates and included DDD where applicable.
- ATTACHMENT C, MEMBER INFORMATION ATTESTATION STATEMENT No changes.

ACOM POLICY 412, CLAIMS RECOUPMENT

noted below.

ACOM Policy was revised for general formatting and to align with DDD integration activities. Policy clarified the submission of individual and bundled claim recoupment requests. Additional clarifications were made to the detailed letter of explanation. *This Policy will have an implementation date of 10/01/19.*

ACOM POLICY 415, PROVIDER NETWORK DEVELOPMENT AND MANAGEMENT PLAN; PERIODIC NETWORK REPORTING REQUIREMENTS

ACOM 415 was revised to include DDD where applicable due to 2019 behavioral health integration activities. *Policy will have an implementation date of 10/01/19.*

- <u>ATTACHMENT A, NETWORK ATTESTATION STATEMENT</u> Minor formatting updates.
- ATTACHMENT B, NETWORK DEVELOPMENT AND MANAGEMENT PLAN CHECKLIST
 Attachment B was updated to reflect DDD's responsibilities as well as program changes.
 There were additional Post Tribal Consultation Notification/Public Comment Change

POST TRIBAL CONSULTATION NOTIFICATION/PUBLIC COMMENT CHANGE:

Updated 'telemedicine' to 'telehealth' to align with AMPM 320-I, Telehealth.

• ATTACHMENT C, ALTCS E/PD CONTRACTOR SUPPLEMENT Minor formatting updates.



- ATTACHMENT D, PROVIDER CHANGES DUE TO RATES REPORT Minor formatting updates.
- ATTACHMENT E, HCBS SERVICE DELIVERY STANDARD REPORT

Former Attachment Ea has been reserved and is now the new Attachment E. Former Attachment Eb has been incorporated into the new Attachment E. Format to collect information has been revised for use of ease and clarity. Title has been updated.

• ATTACHMENT F, DME SERVICE DELIVERY REPORTING

Attachment F had a title update and now applies to ACC Contractors. There were additional Post Tribal Consultation Notification/Public Comment Change noted below.

POST TRIBAL CONSULTATION NOTIFICATION/PUBLIC COMMENT CHANGE:

Instructions for Attachment F:

ACC, E/PD, and DDD Contractors shall submit Attachment F and a cover letter as specified in the Contract.

- 1. The months and calendar year covered by the reporting period.
- 2. The type of Medical Equipment provided. Contractors shall report the identified Medical Equipment provided to members placed in Home and Community Based settings only.
- 3. The number of Medical Equipment provided to members during the reporting period (Note: 'Provided' includes delivery of the Medical Equipment itself and completion of installation and/or training to the member. Augmentative Communication Devices 'Provided' includes delivery of device and completion of first training visit.
- 4. The Average time in days from the request for the service authorization to the service being provided.

ACOM POLICY 416, PROVIDER INFORMATION

<u>ACOM</u> Policy 416, Drug List tiers are no longer applicable and have been removed. Language was added to clarify that a member has the right to participate in treatment decisions regarding his or her health care, including, the right to refuse treatment. The Provider Manual for the Division of Developmental Disabilities (DDD) shall now include language surrounding Behavioral health assessments and service planning requirements and will be responsible for the oversight of behavioral health services to their members. There were additional Post Tribal Consultation Notification/Public Comment Change noted below. *This Policy will have an implementation date of 10/01/19*.



ACOM POLICY 432, BENEFIT COORDINATION AND FISCAL RESPONSIBILITY FOR BEHAVIORAL HEALTH SERVICES AND PHYSICAL HEALTH SERVICES

ACOM 432 was revised due to the 2019 behavioral health integration activities. Policy is applicable to DDD for the coordination of benefits and financial responsibility for AHCCCS covered members who are not enrolled in an integrated line of business; however, policy is applicable to DDD only in those limited situations when AHCCCS members are not integrated. In addition, the definition of AIHP is updated to align with Contract. AIHP reimburses physical and behavioral health services for eligible members assigned to a RBHA and TRBHA. *Policy will have an implementation date of 10/01/19*.

• ATTACHMENT A, MATRIX OF FINANCIAL RESPONSIBILITY BY RESPONSIBLE PARTY No changes.

POST TRIBAL CONSULTATION NOTIFICATION/PUBLIC COMMENT CHANGES:

B. SPECIFIC CIRCUMSTANCES REGARDING PAYMENT FOR BEHAVIORAL HEALTH SERVICES

The Enrolled Entity is responsible for reimbursement of services associated with a PCP visit for *the diagnosis and treatment of behavioral health conditions within the PCP's scope of practice. Such treatment shall include but not be limited to substance use disorders, diagnosis and treatment of depression, anxiety and/or ADHD, and/or Opioid Use Disorder (OUD) including professional fees, related prescriptions, laboratory and other diagnostic tests. PCPs who treat members with these behavioral health conditions may provide medication management services including prescriptions, laboratory, and other diagnostic tests necessary for diagnosis, and treatment.*

ACOM POLICY 435, TELEPHONE PERFORMANCE STANDARDS AND REPORTING

ACOM 435 was revised due to the 2019 behavioral health integration activities. Added applicability to DDD, with the expectation DDD will pass these requirements down to their subcontracted plans. Added additional responsibility for notifying separate performance for calls regarding members vs providers and the number of days in a month where standards were not met. Also added non-compliance for each standard. *Policy will have an implementation date of 10/01/19*.

• **ATTACHMENT A, TELEPHONE PERFORMANCE MEASURES TEMPLATE** Attachment B has merged into Attachment A as "Attachment A, worksheet B".