

DATE: September 26, 2019

To: 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 DHCMContractsandPolicy@azahcccs.gov.

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)

The Contract and Policy Unit is transitioning the Policies from the Approved Not Yet Effective section of the ACOM webpage to the ACOM final publishing section. Some Policies may have additional changes since the date they were first posted to the Approved Not Yet Effective section. In the event additional changes were made, those revisions are indicated below. Policies that had no additional changes are then listed after. The transitioned policies have a 10/01/19 effective date.

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.

ATTACHMENT A, ORGANIZATIONS RECOGNIZED BY AHCCCS

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.

O ATTACHMENT B, CONTRACTOR WEBSITE CERTIFICATION CHECKLIST

Attachment B was revised for general formatting updates and included DDD where applicable.

O ATTACHMENT C, MEMBER INFORMATION ATTESTATION STATEMENT

No changes.



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.

O 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.

POLICY 412, CLAIMS RECOUPMENT

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.

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.

ATTACHMENT A, NETWORK ATTESTATION STATEMENT Minor formatting updates.

O ATTACHMENT B, NETWORK DEVELOPMENT AND MANAGEMENT PLAN CHECKLIST

Attachment B was updated to reflect DDD's responsibilities as well as program changes.

POST-PUBLIC COMMENT CHANGE:

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

O ATTACHMENT C, ALTCS E/PD CONTRACTOR SUPPLEMENT

Minor formatting updates.

O ATTACHMENT D, PROVIDER CHANGES DUE TO RATES REPORT

Minor formatting updates.



O 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.

POLICY 416, PROVIDER INFORMATION

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.

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.

ATTACHMENT A, MATRIX OF FINANCIAL RESPONSIBILITY BY RESPONSIBLE PARTY

No changes.

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.

O ATTACHMENT A, TELEPHONE PERFORMANCE MEASURES TEMPLATE

Attachment B has merged into Attachment A as "Attachment A, worksheet B".