

DATE:	March 09, 2022
<b>TO</b> :	Holders of the AHCCCS Contractor Operations Manual
FROM:	DHCM Contracts and Policy
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 602-417-4055 or email at DHCMContractsandPolicy@azahcccs.gov.

#### **INFORMATION REGARDING COVID-19**

In response to Medicaid-related questions from providers and contractors arising from the COVID-19 pandemic, AHCCCS has developed a list of Frequently Asked Questions (FAQs) Regarding Coronavirus Disease 2019 (COVID-19) which is updated regularly. It is important to note that there are instances where the information presented in the CMS-approved flexibilities and COVID-19 FAQs does not align with provisions set forth by the AHCCCS Contractor Operations Manual (ACOM). In these instances, the CMS-approved flexibilities and FAQs take precedence and are controlling.

#### NAME CHANGE

Effective April 1, 2021, Comprehensive Medical and Dental Program (CMDP) changed to Comprehensive Health Plan (CHP) due to Behavioral health integration. Refer to Laws 2019, 1<sup>st</sup> Regular Session. AHCCCS is in the process of revising all pertinent documents to reflect the new name.

**AHCCCS CONTRACT AND POLICY DICTIONARY AND AHCCCS RELATED ACRONYMS** To view the AHCCCS Contract and Policy Dictionary, please access the following link:

### AHCCCS CONTRACT AND POLICY DICTIONARY

Consistent with the Arizona Management System (AMS) principles to streamline processes and provide consistency in Policy Development, the Contract and Policy Unit has developed a new AHCCCS Contract and Policy Dictionary. The Dictionary provides a centralized location for definitions that are currently found in the various ACOM and AMPM Policies. The Contract and Policy Dictionary can be found on the AHCCCS website under Resources – Guides-Manuals-Policies. Although currently the Dictionary reflects only definitions from the ACOM and AMPM, in the future it will include definitions from the Contracts as well. Definitions found in the Dictionary will be removed from the ACOM and AMPM Policies as they are published and a hyperlink to the AHCCCS Contract and Policy Dictionary will be included. Some policies have specific terms/definitions that will need to apply to the respective Policy only; those terms/ definitions will remain in the Policy and will include a statement indicating the term/definition is applicable 'For purposes of this Policy' only.

To view the AHCCCS Related Acronyms, please access the following link:

### AHCCCS RELATED ACRONYMS

Common AHCCCS Related Acronyms can be found on the AHCCCS website under AHCCCS Info – About Us.

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# **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 324 – TARGETED INVESTMENTS PROGRAM

ACOM Policy 324 was revised to include information and requirements for Year six of the Targeted Investments (TI) Program due to CMS approving the extension of the AHCCCS 1115 Waiver Demonstration, including extension of the TI Program for the year 10/1/21 - 09/30/22. Contractors shall make specific payments to certain Medicaid providers pursuant to 42 CFR 438.6(c), with such payments incorporated into actuarially sound capitation rates. These payments are intended to incentivize providers to improve performance and increase physical and behavioral health care integration and coordination for individuals with behavioral health needs.

Retroactive Effective Date: 10/01/21

### PREVIOUSLY ADDED TO APPROVED NOT YET EFFECTIVE

### ACOM POLICY 429 - DIRECT CARE WORKER TRAINING AND TESTING PROGRAM

Refer to Revision Memo dated 10/01/19 for summary of changes. *Implementation Date Pending.* 

### ACOM POLICY 432 – RESERVED

ACOM Policy 432 is being reserved, all members will be enrolled with an integrated health plan, with minimal exceptions. Contract language identifies those few exceptions surrounding what plan pays: physical health, and what plan pays behavioral health services. *Implementation Date 10/01/22.* 

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