

1620-J OUT-OF-STATE PLACEMENT STANDARD

EFFECTIVE DATES: 02/14/96, 08/14/18

REVISION DATES: 10/01/04, 02/01/05, 09/01/05, 01/01/06, 10/01/07, 01/01/11, 05/01/12,
01/01/16, 06/13/18

I. PURPOSE

This Policy applies to ALTCS/EPD, DES/DDD (DDD) Contractors, and Tribal ALTCS Programs as delineated within this Policy. This Policy establishes standards related to the long term placement of members in out-of-state settings. It does not apply to situations in which the member is temporarily absent from the State.

For out-of-state placement criteria and procedures for behavioral health treatment, refer to AMPM Policy 450.

II. DEFINITIONS

CASE MANAGEMENT A collaborative process which assesses, plans, implements, coordinates, monitors, and evaluates options and services to meet an individual's health needs through communication and available resources to promote quality, cost-effective outcomes. Contractor Case Management for DDD is referred to as Support Coordination.

OUT-OF-STATE SERVICES Services provided to members outside of Arizona that are covered as provided for under Code of Federal Regulations (CFR) 42 CFR, Part 431, Subpart B. This includes services that, as determined on the basis of medical advice, are more readily available in other states and services needed due to a medical emergency. Services furnished to AHCCCS members outside the United States (as defined in Chapter 300) are not covered.

III. POLICY

Contractors and Tribal ALTCS programs shall make every effort to secure placement for members in state. For circumstances requiring an out of state placement written authorization from AHCCCS is required prior to the placement of an ALTCS member in an out-of-state placement. Personal residences outside of the State of Arizona are not approved placements. Out-of-state placement facilities must be registered with AHCCCS and shall be approved in licensed/certified residential-type settings only (e.g. nursing facilities, residential treatment centers, group homes).

In addition to all other ALTCS Case Management standards, the following standards apply when the ALTCS Contractor or Tribal ALTCS Program seeks an out-of-state placement:

1. A request for out-of-state placement shall be submitted to AHCCCS when it is determined that an ALTCS member's need for services cannot be met by existing providers within the State of Arizona.
2. Tribal ALTCS Programs requesting out-of-state placement approval for members being placed in one of the nursing facilities in Utah or New Mexico shall submit a written request to the AHCCCS Division of Fee-For-Service Management (DFSM), using AMPM Exhibit 1620-7.
3. ALTCS E/PD Contractors and DDD requesting out-of-state placement approval shall submit a written request to the AHCCCS Division of Health Care Management (DHCM), Medical Management (MM) Unit. The request shall include at least the following information:
 - a. Member name and AHCCCS ID#,
 - b. Name/location of facility where the Contractor intends to place the member, include the facility's AHCCCS provider ID#,
 - c. Description of the member's physical/behavioral condition that necessitates this placement,
 - d. Description of facility's program(s) that makes this placement appropriate for the member,
 - e. Information about other in-state placement options ruled out for the member, and
 - f. Plan for member's return to an Arizona placement.
4. AHCCCS approvals are generally given for six month intervals. The ALTCS Case Managers shall submit appropriate documentation to request a renewal if the out-of-state placement is expected to continue beyond the initial approval time period. Requests for renewals shall be submitted prior to the expiration of the previous approval.