



Arizona Association of Health Plans
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***** URGENT: TIME SENSITIVE INFORMATION *****

September 19, 2018

Subject: Services to AHCCCS Members by Non-Contracted Providers

Dear Health Care Provider:

October 1st marks a milestone in Arizona's AHCCCS Medicaid Program. On that date, over 1.5 million AHCCCS members will be able to access their physical and behavioral health care services through one health plan – the new integrated “AHCCCS Complete Care” health plans.

Most of the 1.5 million AHCCCS members will stay with their current health plan to access the full array of integrated services. Approximately 300,000, however, will be changing to a new health plan. Many of the AHCCCS contracted health plans have been through this process before, and through the years, AHCCCS has developed strong systems and processes to ensure a smooth transition.

We know that you are equally committed to ensuring continuity of care for the members you serve. To support us in this effort, we wanted to share three helpful hints.

1. **Use the AHCCCS Online membership look up tool**, located at: <https://azweb.statemedicaid.us/>. There is a time lag between the provider portals of our individual health plans and the AHCCCS membership data plus patients may not yet have their health plan ID cards, making the AHCCCS Online website the best place to go to verify eligibility and health plan assignment.
2. **There are built-in member protections to ensure continuity of care.** With the number of members changing health plans, as well as the integration of behavioral health services into the AHCCCS Complete Care plans, we know that some of your membership may have changed to a health plan with which you are not currently contracted. **We ask you not to turn these members away.** AHCCCS has generally required that we permit our members to continue services with (and pay claims for) non-contracted providers for the duration of their current treatment, or six months, whichever occurs first. This allows for sufficient time to establish a contract or transition the member's care.
3. **Go to the health plan websites for routine key information.** With the possibility of higher-than-normal call volumes in October, health plan websites may be your most efficient means to address provider inquiries. If you have questions about prior

authorization requirements, coverage limits, or how to submit claims for a specific health plan, **please start with the AHCCCS health plan websites:**

<p>American Indian Health Program</p> <p>azahcccs.gov/AmericanIndians/AIHP/</p>	<p>Arizona Complete Health – Complete Care Plan</p> <p>www.azcompletehealth.com/completecare</p>
<p>Banner University Family Care</p> <p>www.bannerufc.com/acc</p>	<p>Care1st Health Plan Arizona</p> <p>www.care1staz.com</p>
<p>Magellan Complete Care</p> <p>www.mccofaz.com</p>	<p>Mercy Care</p> <p>www.mercycareaz.org</p>
<p>Steward Health Choice Arizona</p> <p>www.stewardhealthchoiceaz.com</p>	<p>UnitedHealthcare Community Plan</p> <p>www.uhccommunityplan.com</p>

We are all committed to making sure that our members get uninterrupted access to care during this transition period, and we sincerely appreciate all that the provider community is doing to make this important changeover as seamless as possible. Working together, we are confident we can make the Complete Care program a success for everyone. **Please know that you have our heartfelt thanks.**

Sincerely,

Arizona’s Complete Care Health Plans

