

## CLAIMS CLUES

A Publication of the AHCCCS DFSM Claims Department

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### UM/CM Unit Name Change to CMSU Effective 7/1/2016

Effective 7/1/2016 the Division of Fee-For-Service Management (DFSM) Utilization Management/Care Management (UM/CM) unit's name will change to:

Care Management Systems Unit (CMSU)

The CMSU functions for the FFS population include prior authorization, utilization review, care coordination and oversight of the Tribal Regional Behavioral Health Authorities (TRBHA) and Tribal ALTCS case management functions.

The prior authorization phone line and fax numbers will remain unchanged and providers may continue to use the Prior Authorization forms found on the AHCCCS website at:

<https://www.azahcccs.gov/PlansProviders/RatesAndBilling/FFS/priorauthorizationforms.html>

### Provider Registration Required for Licensed Board Certified Behavior Analysts (BCBA)

AHCCCS is now accepting applications from licensed Board Certified Behavior Analysts. This new AHCCCS provider type will be effective October 1, 2016 and will be designated as "BC" in the AHCCCS Provider Registration system.

#### *Provider Registration and Other Requirements*

1. *BCBAs currently providing services through AHCCCS-registered providers*

Licensed and credentialed BCBAs who are currently working under an AHCCCS-registered provider through a contract with an AHCCCS Managed Care Organization (MCO) will need to submit a provider registration packet no later than **August 15, 2016** to AHCCCS Provider Registration. The Provider Registration application can be found at:

[www.azahcccs.gov/PlansProviders/CurrentProviders/packet.html](http://www.azahcccs.gov/PlansProviders/CurrentProviders/packet.html).

Providers will not be able to submit claims beginning with date of service October 1, 2016 for BCBA services unless there is an active AHCCCS-registered BCBA provider submitted as the rendering/service provider.

Licensed BCBA's who are currently working under an AHCCCS-registered provider and providing services through AHCCCS Fee for Service will need to submit a provider registration packet no later than August 15, 2016 to AHCCCS Provider Registration. Providers will not be able to submit claims beginning with date of service October 1, 2016 for BCBA services unless there is an active AHCCCS-registered BCBA provider submitted as the rendering/service provider.

2. *BCBA's not currently employed by an AHCCCS-registered provider who wish to practice independently starting on October 1, 2016*

Licensed BCBA's who wish to practice independently starting on October 1, 2016 will need to submit a provider registration packet no later than **August 15, 2016** to AHCCCS Provider Registration. The Provider Registration application can be found at [www.azahcccs.gov/PlansProviders/CurrentProviders/packet.html](http://www.azahcccs.gov/PlansProviders/CurrentProviders/packet.html). In order to submit claims for AHCCCS Fee for Service programs, an active unrestricted license in the state of Arizona and an active AHCCCS provider registration number is required. In order to submit claims for AHCCCS managed care programs, BCBA's will need to be credentialed and contracted with AHCCCS MCO's in addition to being registered through AHCCCS provider registration. Credentialing requirements for BCBA's are outlined in AHCCCS Medical Policy Manual (AMPM) [Chapter 900](#).

For additional questions regarding the provider registration process please contact Angelica Quezada, Health Program Manager II within the Provider Registration section at (602)417-4098 or [Angelica.Quezada@azahcccs.gov](mailto:Angelica.Quezada@azahcccs.gov). Applications can be faxed to Angelica Quezada's attention at (602)256-1474.

## Provider Records Retention Requirements

The AHCCCS Provider Participation Agreement (PPA) section B. General Terms and Conditions item 5 advises that: "all books and records shall be maintained in such detail as to reflect each service provided and all other costs and expenses of whatever nature for which payment is made to the Provider."

The PPA continues in item 6 "The Provider shall preserve and make available the records ... for a period of six (6) years from the date of payment, ... for a period of six (6) years from the date of termination..."

If a provider cannot produce the records to support the services as billed then the claim will be denied as unsubstantiated and paid monies will be recouped.

## Provider “Going Out of Business” Process

The AHCCCS Provider Participation Agreement (PPA) section B. General Terms and Conditions item 31 advises that the Provider may voluntarily terminate the PPA upon a thirty (30) day written notice. Item 33 states that “the Provider must assist in providing for the orderly transition of care for members ...”. Provider must retain records for a period of six (6) years from the date of termination. (see above article)