

DATE: November 01, 2018
To: Holders of the AHCCCS Medical Policy Manual
FROM: DHCM Contracts and Policy
SUBJECT: AHCCCS Medical Policy Manual (AMPM)

This memo describes revisions and/or additions to the AMPM.

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 MEDICAL POLICY MANUAL (AMPM)

To view the policies and attachments, please access the following link:

[AHCCCS MEDICAL POLICY MANUAL \(AMPM\)](#)

During the month of September AHCCCS will be transitioning the Policies from the *Approved Not Yet Effective* section of the AMPM webpage to the AMPM 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 10/01/18 effective date.

POLICY 310-Q, RESERVED

Policy 310-Q, Non-Physician Surgical First Assistant Services was reserved as the service will be incorporated into AMPM Exhibit 300-1.

POLICY 400-2A, MATERNITY AND FAMILY PLANNING SERVICES PLAN CHECKLIST

Under Maternity and Family Planning Services Narrative Plan, included 'Well Women's Preventative Care' in checklist item #1.

1. A written description of all planned activities to address the Contractor's minimum requirements, as specified in the Contractor Requirements for Providing Maternity Care, Family Planning Services *and Well Women's Preventative Care* including participation in community and/or quality initiatives within the communities served by the Contractor. The narrative description shall also include Contractor activities to identify member needs, coordination of care, and follow-up activities to ensure appropriate and medically necessary treatment is received in a timely and culturally competent manner.

Under Maternity/Family Planning Services Work Plan, clarified checklist item #3:

3. A work plan that formally documents the Maternity and Family Planning program objectives, strategies and activities directed at achieving optimal birth outcomes, as based on the Contractor Requirements outlined in the Maternity and Family Planning

Services sections of AMPM Chapter 400. The work plan shall be limited to three but no more than five, goals ***which may or may not include select performance measures from Contract.***

POLICY 400-2B, EPSDT ANNUAL PLAN CHECKLIST

Under EPSDT Plan and Evaluation Checklist, checklist item #1. k., included 'mothers'.

k. Process to provide outreach related to dangers of lead poisoning to ***mothers and*** all EPSDT age members as specified in policy and implementation of strategies for appropriate follow-up care for members who have abnormal blood lead test results.

Under EPSDT Work Plan, clarified checklist item #3.

3. A work plan that formally documents the EPSDT program objectives, strategies and activities and demonstrates how these activities will improve the quality of services, the continuum of care, and health care outcomes (including processes related to developmental screening tools and childhood obesity). The work plan shall be limited to three, but no more than five goals which ***may or may not include select performance measures from Contract.***

POLICY 410, MATERNITY CARE SERVICES

Clarified definition for 'Postpartum'.

For the purposes of this Policy, postpartum is defined as the period beginning the day of ***parturition*** and ends the last day of the month in which the ***57th*** day following ***parturition*** occurs.

- **ATTACHMENT A, SEMIANNUAL REPORT OF NUMBER OF PREGNANT WOMEN WHO ARE HIV/AIDS POSITIVE**
No changes.
- **ATTACHMENT B, REQUEST FOR STILLBIRTH SUPPLEMENT**
No changes.
- **ATTACHMENT C, AHCCCS CERTIFICATE OF NECESSITY FOR PREGNANCY TERMINATION**
No changes.
- **ATTACHMENT D, AHCCCS VERIFICATION OF DIAGNOSIS BY CONTRACTOR FOR A PREGNANCY TERMINATION REQUEST**
No changes.
- **ATTACHMENT E, POLICY 410, ATTACHMENT E - MONTHLY PREGNANCY TERMINATION REPORT**
No changes.

POLICY 411, WOMEN’S PREVENTATIVE CARE SERVICES

No Changes.

POLICY 1020, MEDICAL MANAGEMENT SCOPE AND COMPONENTS

No changes to Policy.

ATTACHMENT A, PSYCHIATRIC SECURITY REVIEW BOARD/GEI CONDITIONAL RELEASE MONTHLY REPORT

No changes to Attachment A.

ATTACHMENT B, ADULT AND CHILD EMERGENCY DEPARTMENT (ED) WAIT TIMES REPORT

No changes to Attachment B.

ATTACHMENT C, JUSTICE REACH-IN REPORT

No changes to Attachment C.

ATTACHMENT D, SPECIAL HEALTH CARE NEEDS REPORTING TEMPLATE

Replaced ‘Substance Use Disorder’ with ‘Opioid Use Disorder (OUD)’ for all Contractors.

ATTACHMENT E, PHARMACY AND PRESCRIBER REPORT TEMPLATE

No changes to Attachment E.

ATTACHMENT F, EMERGENCY DEPARTMENT (ED) DIVERSION REPORTING SUMMARY

No changes to Attachment F.

ATTACHMENT G, HIGH NEED/HIGH COST MEMBER LIST

No changes to Attachment G.

APPROVED NOT YET EFFECTIVE

To view the policies and attachments, please access the following link:

AMPM APPROVED NOT YET EFFECTIVE

The following Policies are posted for Contactor reference. These Policies are not in effect until the date referenced in each Policy.

POLICY 310-A, RESERVED

POLICY 310-E, RESERVED

POLICY 310-G, RESERVED

POLICY 310-H, RESERVED

POLICY 310-O, RESERVED

POLICY 310-T, RESERVED

POLICY 310-W, RESERVED

POLICY 310-Y, RESERVED

POLICY 310-CC, RESERVED

POLICY 320-A, RESERVED

POLICY 320-F, RESERVED

POLICY 320-K, RESERVED

POLICY 961-C, COMMUNITY SERVICE AGENCIES