

DATE: January 25, 2024
TO: Holders of the AHCCCS Medical Policy Manual
FROM: DHCS Contracts and Policy
SUBJECT: AHCCCS Medical Policy Manual (AMPM)

This memo describes additions and/or revisions to the AMPM. For questions regarding policy updates email the Contracts and Policy Unit at: DHCMContractsandPolicy@azahcccs.gov.

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, 1st Regular Session. AHCCCS is in the process of revising all pertinent documents to reflect the new name.

DIVISION OF DEVELOPMENTAL DISABILITIES TRIBAL HEALTH PROGRAM (DDD THP)

Effective April 1, 2022, the Division of Developmental Disabilities (DDD) Tribal Health Program (THP) is the health plan which administers Fee-For-Service (FFS) physical health, behavioral health, and Long-Term care Services and Supports (LTSS) for DDD-THP enrolled American Indian/Alaska Native members. AHCCCS is in the process of revising all pertinent documents to reflect this new program.

CONTRACT NAME CHANGE

Effective October 1, 2022, the Regional Behavioral Health Authority (RBHA) for the Managed Care Organization was aligned with the Competitive Contract Expansion YH20-0002 to expand the provision of services for the awarded ACC-RBHA Contractors. AHCCCS is in the process of revising all pertinent documents to reflect this change.

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](#)

The AHCCCS Contract and Policy Dictionary provides a centralized location for definitions that are utilized in various ACOM and AMPM Policies. A hyperlink to the location of the AHCCCS Contract and Policy Dictionary has been added to all policies found in both the ACOM and AMPM. AHCCCS is in the process of adding an area within the Definition Section of all policies that identifies terms used/referenced in that policy to encourage viewing of the AHCCCS Contract and Policy Dictionary to better understand how AHCCCS defines the word or term. However, some policies have specific terms/definitions that may have a slightly different meaning for that respective Policy; those terms/ definitions will remain in the Policy and will include a statement indicating 'For purposes of this Policy only'.

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

[AHCCCS RELATED ACRONYMS](#)

[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 \(AMPM\)](#)

AMPM POLICY 820 – FEE-FOR-SERVICE PRIOR AUTHORIZATION REQUIREMENTS

AMPM Policy 820 was revised to align with provider termination letters; adding language to outline AHCCCS discretionary authority to terminate approved prior authorizations due to health and safety, and fraud, waste, and abuse concerns.

- **ATTACHMENT A – AHCCCS HYSTERECTOMY CONSENT AND ACKNOWLEDGEMENT FORM**

Attachment A had no changes.

AMPM POLICY 830 – QUALITY OF CARE AND FEE-FOR-SERVICE PROVIDER REQUIREMENTS

AMPM Policy 820 was revised to align with provider termination letters; adding language to outline AHCCCS discretionary authority to terminate approved prior authorizations due to health and safety, and fraud, waste, and abuse concerns.