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Welcome to the IHS/638 Forum First Quarter 2020

February 11, 2020
2:00 P.M. – 3:30 P.M.

AGENDA

1. I.H.S./638 and Tribal Consultation Schedules for 2020
2. American Indian Medical Homes (AIMH)
3. Tribal ALTCS Webpage
4. Electronic Visit Verification (E.V.V.)
5. Social Determinants of Health
6. P.A. Forms OptumRx
7. AHCCCS AIHP Preferred Provider Lists
8. AHCCCS Provider Enrollment Portal (APEP) & Transaction Insight Portal Reminders
9. Behavioral Health Services Updates (CBHSG)
10. Transaction Insight Portal Response Codes
11. Medicare Part B Billing for Inpatient Facility
12. Telehealth Services Update
13. AHCCCS Resources

I.H.S./638 Tribal Forum Schedule 2020

Day	Month / Date	Time
Tuesday	August 04, 2020	1:30pm – 3:30pm
Tuesday	May 05, 2020	1:30pm – 3:30pm
Wednesday	November 04, 2020	1:30pm – 3:30pm

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2020 AHCCCS Quarterly Tribal Consultation Meetings

DATE	TIME	LOCATION	CALL-IN INFORMATION
February 13, 2020 (Thursday)	1:00 p.m. – 5:00 p.m. (Arizona time)	Hosted by NATIVE HEALTH NATIVE HEALTH Central Building C – Conference Room 4041 N. Central Ave., Phoenix, AZ 85012	https://ahcccs.zoom.us/j/626158532 Click link or copy and paste into browser to join video meeting. To join by phone: +1 877-853-5257 or +1 888 475 4499 (US Toll-free) Meeting ID: 626 158 532
May 07, 2020 (Thursday)	1:00 p.m. – 5:00 p.m. (Arizona time)	Hosted by Native American Connections Phoenix Indian School Visitor Center at Steele Indian School Park 300 E. Indian School Rd., Phoenix, AZ 85012	https://ahcccs.zoom.us/j/350453796 Click link or copy and paste into browser to join video meeting. To join by phone: +1 877-853-5257 or +1 888 475 4499 (US Toll-free) Meeting ID: 350 453 796
August 13, 2020 (Thursday)	TBD		
November 5, 2020 (Thursday)	TBD		

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https://www.azahcccs.gov/AmericanIndians/Downloads/Consultations/Meetings/2020/AHCCCS_Tribal_Consultation_Schedule.pdf

AMERICAN INDIAN MEDICAL HOME (AIMH)

What is the AIMH?

- The American Indian Medical Home (AIMH) is a care management model that puts AHCCCS American Indian Health Program (AIHP) members at the forefront of care.
- AIMHs help address health disparities between American Indians and Alaskan Natives in Arizona by enhancing case management and care coordination through the use of Primary Care Case Managers (PCCM) and 24 hour access to the care team.

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AIMH Provider Requirements

- Be an IHS or Tribal 638 facility
- Enter into an AIMH IGA
- Primary Care Medical Home (PCMH) accreditation
- Provide 24 hour telephonic access to the care team
- Dependent on selected tier level
  - Provide diabetes education
  - Participate bi-directionally in the State Health Information Exchange (HIE)

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AIMH Eligible Provider Types

02 – Hospital
05 – Clinic (excluding Dental Providers)
IC – Integrated Clinic
C2 – Federally Qualified Health Center (FQHC)
C5 – 638 Federally Qualified Health Center (FQHC)
29 – Community/Rural Health Center (RHC)

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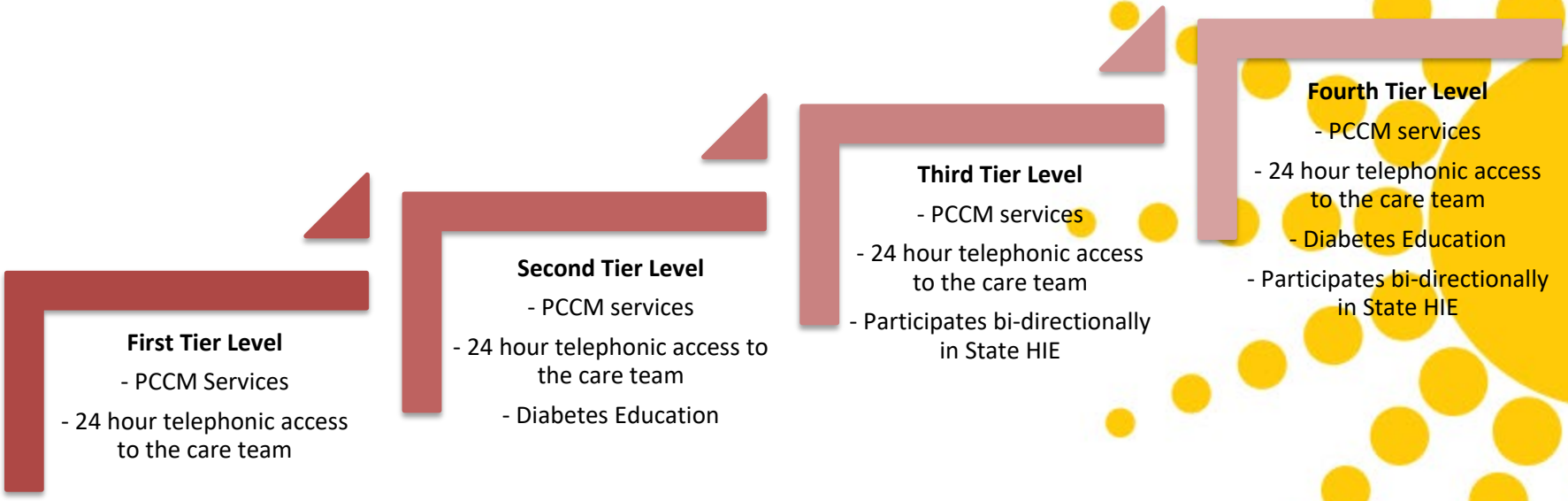
AIMH Services per Tier Level



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AIMH Reimbursement Rate

- Facilities who choose to become an AIMH will receive a Prospective Per Member Per Month (PMPM) rate for services provided by their medical home.
- Payments are dependent upon the AIMH tier level selected.
- Tier levels include annual rate increases.

AIMH 4.6% rate increase calculation – 10 year forecast

Calendar Year	CY 2017	CY 2018	CY 2019	CY 2020	CY 2021	CY 2022	CY 2023	CY 2024	CY 2025	CY 2026	CY 2027
Level 1	13.26	13.87	14.51	15.18	15.87	16.60	17.37	18.17	19.00	19.88	20.79
Level 2	15.26	15.96	16.70	17.46	18.27	19.11	19.99	20.91	21.87	22.87	23.93
Level 3	20.76	21.71	22.71	23.76	24.85	25.99	27.19	28.44	29.75	31.12	32.55
Level 4	22.76	23.81	24.90	26.05	27.25	28.50	29.81	31.18	32.62	34.12	35.69

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Active AIMHs

- Chinle Comprehensive Health Care Facility
  - Tier 4
  - **12,459 members**
- Phoenix Indian Medical Center (PIMC)
  - Tier 2
  - **4,062 members**
- Whiteriver Indian Hospital
  - Tier 2
  - **4,674 members**
- Winslow Indian Health Care Center
  - Tier 3
  - **3,152 members**
- San Carlos Apache Healthcare
  - Tier 4
  - **1,400 members**
- Fort Yuma Indian Health Center
  - Tier 1

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Resources

- IHS/638 Providers can send questions to
  - AIMH@azahcccs.gov

- Review AIMH information at
  https://www.azahcccs.gov/AmericanIndians/AmericanIndianMedicalHome/

- State Plan Amendment (SPA)
  https://www.azahcccs.gov/Resources/StatePlans/StatePlanAmendments.html

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Tribal ALTCS Web Page

Tribal ALTCS Web Page – NEW!

AHCCCS has updated its Tribal ALTCS web page.

https://www.azahcccs.gov/PlansProviders/FeeForServiceHealthPlans/ProgramsAndPopulations/longtermcarecasemanagement.html

Information contained on the web page includes:

- An overview of the Tribal ALTCS health plan benefits;
- A listing of Tribal ALTCS programs and contact information;
- Prior Authorization information;
- Tribal ALTCS Case Management Resources;
- Provider Enrollment Information; and
- Tribal ALTCS Notifications (sent out via Constant Contacts).

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Electronic Visit Verification (E.V.V.)

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Electronic Visit Verification (EVV)

EVV is an electronic based system that verifies when caregiver visits occur and documents the precise time services begin and end. It ensures that members receive their medically necessary services.

- **Service providers may choose to use an alternate EVV system vendor (at their own cost) and must interface with the statewide system as a data aggregator.**

EVV Web page: **Electronic Visit Verification (EVV) Website**

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Electronic Visit Verification (EVV)

Pursuant to Section 1903 of the Social Security Act (42 U.S.C. 1396b), also known as the 21st Century Cures Act, in order to prevent a reduction in the Federal Medical Assistance Percentage (FMAP), AHCCCS is mandated to implement Electronic Visit Verification (EVV) for non-skilled in-home services (attendant care, personal care, homemaker, habilitation, respite) (anticipated date is in June 2020) and for in-home skilled nursing services (home health) by January 1, 2023.

- The EVV system, must at a minimum, electronically verify the:
- Type of service performed
- Individual receiving the service
- Date of the service
- Location of service delivery
- Individual providing the service
- Time the service begins and ends

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AHCCCS Provider Types Required to use Electronic Visit Verification

Provider Description	Provider Types
Attendant Care Agency	40
Behavioral Outpatient Clinic	77
Community Service Agency	A3
Fiscal Intermediary	FI
Habilitation Provider	39
Home Health Agency	23
Integrated Clinic	IC
Non-Medicare Certified Home Health Agency	95
Private Nurse	46

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Electronic Visit Verification (EVV)

What Stays the Same	What Will Change
Members have choice of provider	Paper timesheet will be eliminated
Availability of services	EVV devices will be used to verify service delivery
Members have choice of individual direct care worker	How member/representative signature is collected
How services are provided	Electronic verification is required at every visit.
Where services are provided	

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HCBS EMAIL LIST AND EVV

AHCCCS has created a Constant Contact email notification list to communicate updates on recent developments for Home and Community Based Services' initiatives such as the EVV initiative.

AHCCCS encourages anyone (members, families, advocates, service providers, etc.) interested in the EVV initiative, such as opportunities for public comment, to sign up to receive communication. To subscribe to the Home and Community Based Settings Updates click on the sign up button below:

AHCCCS-DHCM : Sign Up to Stay in Touch

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Reminders: Social Determinates of Health (SDoH)

https://www.azahcccs.gov/PlansProviders/Demographics/

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Social Determinates of Health (SDoH)

AHCCCS began on April 1, 2018 to require providers use of Social Determinants of Health diagnosis codes on applicable claims to track member outcomes.

The Specific ICD-10 diagnosis codes representing Social Determinants of Health are a valuable source of information as to factors that impact or potentially impact member health.

The Social Determinants of Health codes identify the conditions in which people are born, grow, live, work, and age.

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Social Determinates include factors like:

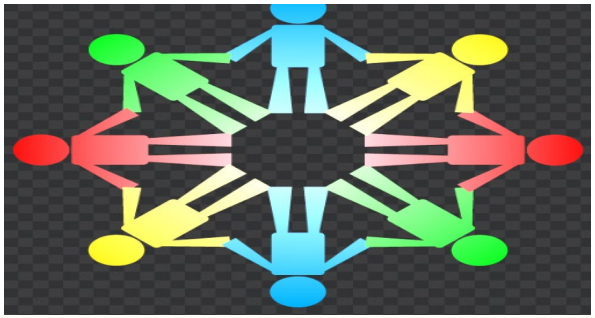
Education

Physical Environment

Employment

Socio-economic Status

Social Support Networks



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Billing Reminder: SDoH

Any social determinant ICD-10 diagnosis codes that are identified should be included on the submitted claims for AHCCCS members, in order to comply with State and Federal coding requirements.

- **Note: Social determinants are not the primary ICD-10 code. They are secondary ICD-10 codes.**

Dental providers will be exempt from the use of social determinants.

This information may be found in the AHCCCS Fee for Service Provider Manual, Chapter 4/Billing Rules.

https://www.azahcccs.gov/PlansProviders/Downloads/FFSProviderManual/FFS_Chap04GeneralBillingRules.pdf

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Billing Reminder: SDoH

Important Note: Social determinants are ***supplemental diagnosis codes*** and should not be used as the *admitting or principal diagnosis code to indicate the medical reason for the visit.*

Coders can reference the American Medical Association (AMA) ICD-10-CM Codebook, (Chapter 21. Factors Influencing Health Status and Contact with Health Services) for additional coding guidance.

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PA Forms for OPTUMRX

Prior Authorization Forms for Pharmacy Requests (to Optum Rx) Updated for IHS/638 Facilities/Pharmacies

The Optum-Rx Prior Authorization Request Form has been updated for our IHS and 638 providers. It can be found on the AHCCCS Website Pharmacy Webpage under the "Optum Rx Prior Authorization Request Form" drop down.

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

This prior authorization form can also be found under the IHS/Tribal Provider Billing Manual as Exhibit 10-1, OptumRx Prior Authorization Request Form

Source: Constant Contact Release 11/29/2019

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Fee for Service Preferred Provider Lists

Northern and Southern Arizona Behavioral Health FFS Provider Lists

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Preferred Providers Lists

This list includes providers who have confirmed they serve FFS members, which includes members of the American Indian Health Program (AIHP), Tribal Regional Behavioral Health Authorities (TRBHA) and Tribal ALTCS members. Its purpose is to aid in referral pathways for Fee for Service members.

Fee-for-Service Preferred Providers (Behavioral Health, Southern Arizona)

- https://www.azahcccs.gov/PlansProviders/Downloads/FFSProviderManual/FFS_Preferred_Provider_List.pdf

Fee-for-Service Preferred providers (Behavioral Health, Northern Arizona)

- https://www.azahcccs.gov/PlansProviders/Downloads/FFSProviderManual/AIHP_Preferred_Providers_Northern_AZ.pdf

Fee-for-Service Preferred providers (Behavioral Health, Central Arizona)

- *** Coming Soon**

Fee-for-Service members may choose any AHCCCS registered provider. To locate AHCCCS registered providers, go to:

https://www.azahcccs.gov/Members/ProgramsAndCoveredServices/ProviderListings/

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AHCCCS PROVIDER ENROLLMENT PORTAL (APEP) to Launch June 01, 2020

***Launch date updated to August 31st, 2020 in May of 2020, due to COVID-19.**

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AHCCCS Provider Enrollment Portal (APEP) New Paper Application Posted

In August of 2020, the AHCCCS provider enrollment process will move from a manual, paper-based system to a new, online system called the AHCCCS Provider Enrollment Portal (APEP). The new online system will allow providers to:

- **Enroll** as an AHCCCS provider
- **Revalidate** as an existing AHCCCS provider
- **Update information** (such as phone and address)
- **Upload and/or update** licenses and certifications

This change, from a manual process to a new, automated system will streamline the provider enrollment process. Initial applications will be processed more quickly and changes to current enrolled providers will all be completed online. The portal is expected to be available June 1st, 2020.

Additional information and FAQ's please visit the AHCCCS Provider Enrollment Portal web page.

https://www.azahcccs.gov/PlansProviders/NewProviders/ProviderUpdates.html

Questions may be directed to AHCCCS Provider Enrollment:

1-800-794-6862 (in-State – Outside of Maricopa County)

1-800-523-0231 (Out of state)

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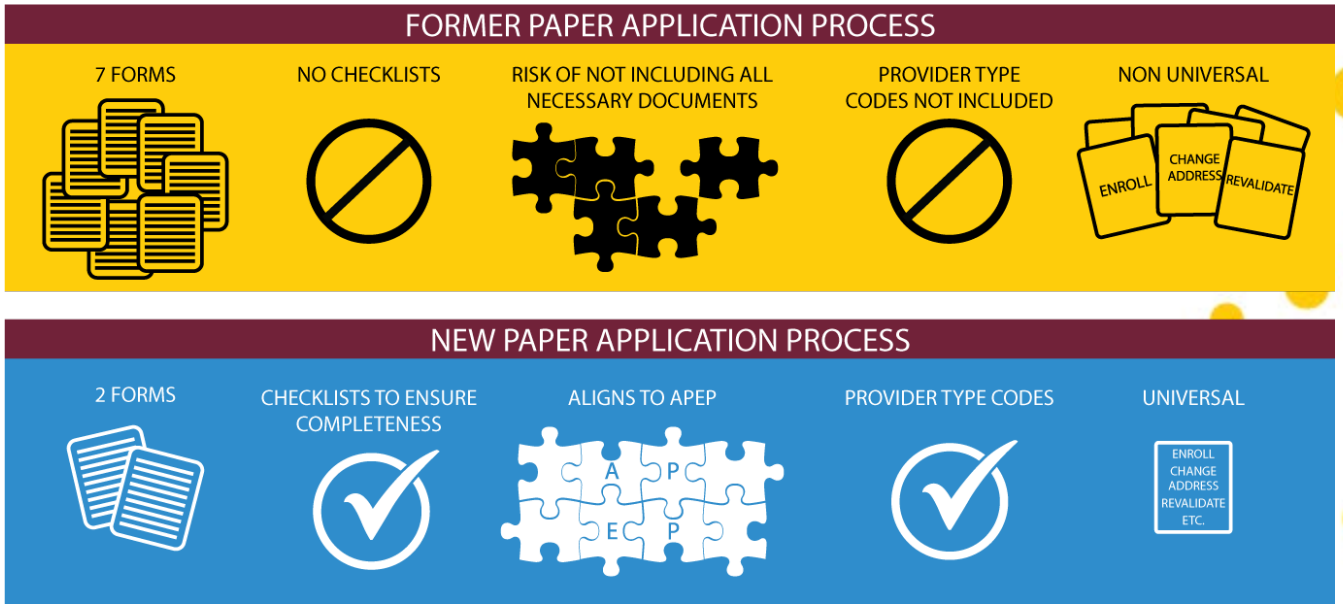
AHCCCS Provider Enrollment Portal (APEP) New Paper Application Posted

In order to follow the alignment of the APEP system, AHCCCS has updated the Provider Enrollment paper application. Although the changes are minor, they will ensure all required information is captured.

The updated Provider Enrollment paper application can be found online at the following site: https://www.azahcccs.gov/PlansProviders/NewProviders/packet.html



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APEP
New Provider Enrollment Form

The Provider Enrollment Team is in the process of implementing the NEW APEP online data base. The Provider Enrollment form can be used for provider enrollment, revalidation, and / or modification to requests.

Completed Forms can be mailed or fax to the AHCCCS Provider Enrollment team.

AHCCCS Provider Enrollment
PO Box 25520 Mail Drop 8100
Phoenix , AZ 85002

FAX:
Attention: AHCCCS Provider Enrollment
Fax # 602-256-1474

Links to the Provider Enrollment Portal and Forms

- AHCCCS Provider Enrollment Portal
- https://www.azahcccs.gov/PlansProviders/Downloads/ProviderRegistration/ProviderEnrollmentFillableForm.pdf

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Behavioral Health Services Updates (CBHSG)

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Behavioral Health Services Updates

Transition of the Covered Behavioral Health Services Guide (CBHSG)

In 2019, information contained within the AHCCCS Covered Behavioral Health Services Guide (CBHSG) will be transitioned into the following manuals:

- **AHCCCS Medical Policy Manual,**
- **Fee-for-Service-Provider Billing Manual, and**
- **IHS/Tribal Provider Billing Manual.**

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Behavioral Health Services Updates

Transition of the Covered Behavioral Health Services Guide (CBHSG)

Information from the CBHSG shall be transitioned into these specific areas within the AHCCCS Medical Policy Manual (AMPM) :

- **AHCCCS Medical Policy Manual (AMPM) Policy 310-B, Behavioral Health Services Benefit**
  - **Title XIX/XXI benefit information.**

- **AMPM Policy 320-T, Non-Title XIX/XXI Behavioral Health Services**
  - **Non-Title XIX/XXI service information.**

- **Appropriate AMPM Policies as necessary, including:**
  - **AMPM Policy 310-BB, Transportation; and**
  - **AMPM Policy 320-V, Behavioral Health Residential Facilities (BHRFs).**

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Behavioral Health Services Updates

Transition of the Covered Behavioral Health Services Guide (CBHSG)

Billing information from the CBHSG shall be transitioned into the following areas:

- **Chapter 19, Behavioral Health Services, FFS Provider Billing Manual**
  - ***Transition in progress.**
- **Chapter 12, Behavioral Health Services, IHS/Tribal Provider Billing Manual**
  - ***Transition in progress.**
  - **Behavioral Health services billing information for IHS/Tribal Providers.**
- **The Medical Coding Resources Web Page**
  - **The Behavioral Health Services Matrix (formerly known as the B2 Matrix)**

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Behavioral Health Services Updates

Transition of the Covered Behavioral Health Services Guide (CBHSG)

Please note that the billing manual updates are in progress. A Constant Contact email will be sent out when these updates are published.

The AMPM policies listed below have been updated and their effective date is 10/01/2019.

310-B Behavioral Health Services Benefit

320-V Behavioral Health Residential Facilities (BHRFs).

320-T Non-Title XIX/XXI Behavioral Health Services

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AMPM Policy 320-U
Pre-Petition Screening, Court Ordered Evaluation and Court Ordered Treatment

- AMPM Policy 320-U COE/COT
- https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/320-U.pdf
- Attachment A- COE Deliverable Template
- https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/320-Ua.xlsx
- Attachment B – A.R.S. 12-136 Flow Chart
- https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/320-Ub.pdf

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AHCCCS Online Provider Portal Update

https://azweb.statemedicaid.us/Account/Login.aspx?ReturnUrl=%2f

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AHCCCS Online Provider Portal Update:

AHCCCS has updated the Online claim submission portal to include the selection of the *Service Locator Code field.*

The *service address* is the business location where the provider sees patients or otherwise provides services.

- A locator code (01, 02, 03, etc.) is assigned to *each service address.*
- As new service addresses are reported to AHCCCS, additional locator codes are assigned.
- When a service address is no longer valid, then the provider must notify AHCCCS of the new service address to ensure the new service address locator codes are updated.
- The Locator code *does not* direct payment to a specific address.
- The Tax ID (TIN) entered on the claim form will direct payment to the correct address.

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AHCCCS Online Provider Portal Update

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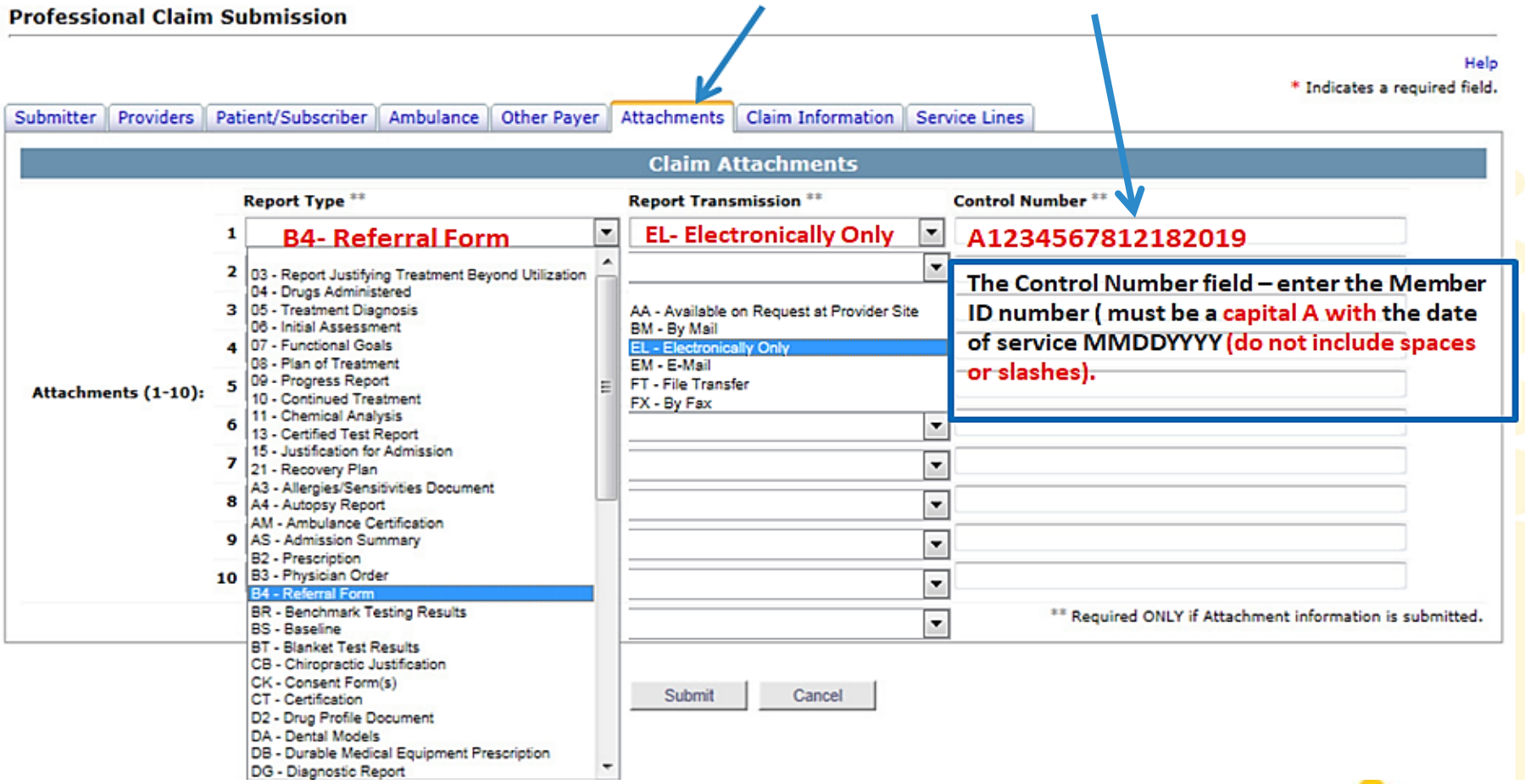
Transaction Insight Portal Reminders:

The first step to uploading any document begins with the claim submission. There are 3 fields to complete on the Attachments Tab - Report Type , Report Transmission (EL) and Control Number (PWK number). After completing the Attachment fields, continue with the Claim Information and Service Lines.



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Transaction Insight Portal Response Codes

Creating your PWK/Control Number

1. The PWK / Control number is a unique number that you will create for each claim to attach a document to the specific claim. The most commonly used format is the AHCCCS member ID number and the date of service **(A123456780211 2020).**
2. The PWK number is used when submitting an electronic claim and its' attachment at the same time.
3. The automatic linking of the document to the claim occurs when the system reads the PWK number finds its' ***Exact*** match, the system will link the document automatically to the claim. **The PWK number must begin with a Capital "A"**
4. If an electronic claim is received with a PWK number, the AHCCCS processing system will "Hold" the claim for up to **15 days** to allow time for the submitter to upload the attachments using the Transaction Insight Portal (TI). If after 15 days the attachment has not been uploaded, the attachment linking process will fail and the claim will deny.
5. Important Note: All claims submitted to AHCCCS are extensively edited by the AHCCCS claims processing system. If errors are identified during the edit process, this may cause the claim to automatically Deny.

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Transaction Insight Portal
Transaction Set Purpose Codes

02- Add (Unsolicited) – PWK number is used when submitting an electronic claim and attachment at the same time. This is an automated process and the fastest way for the claim and attachment to link.

11 – Response - Must use the AHCCCS 12 digit Claim Reference Number, and this process will default to a *manual linking* of the attachment.

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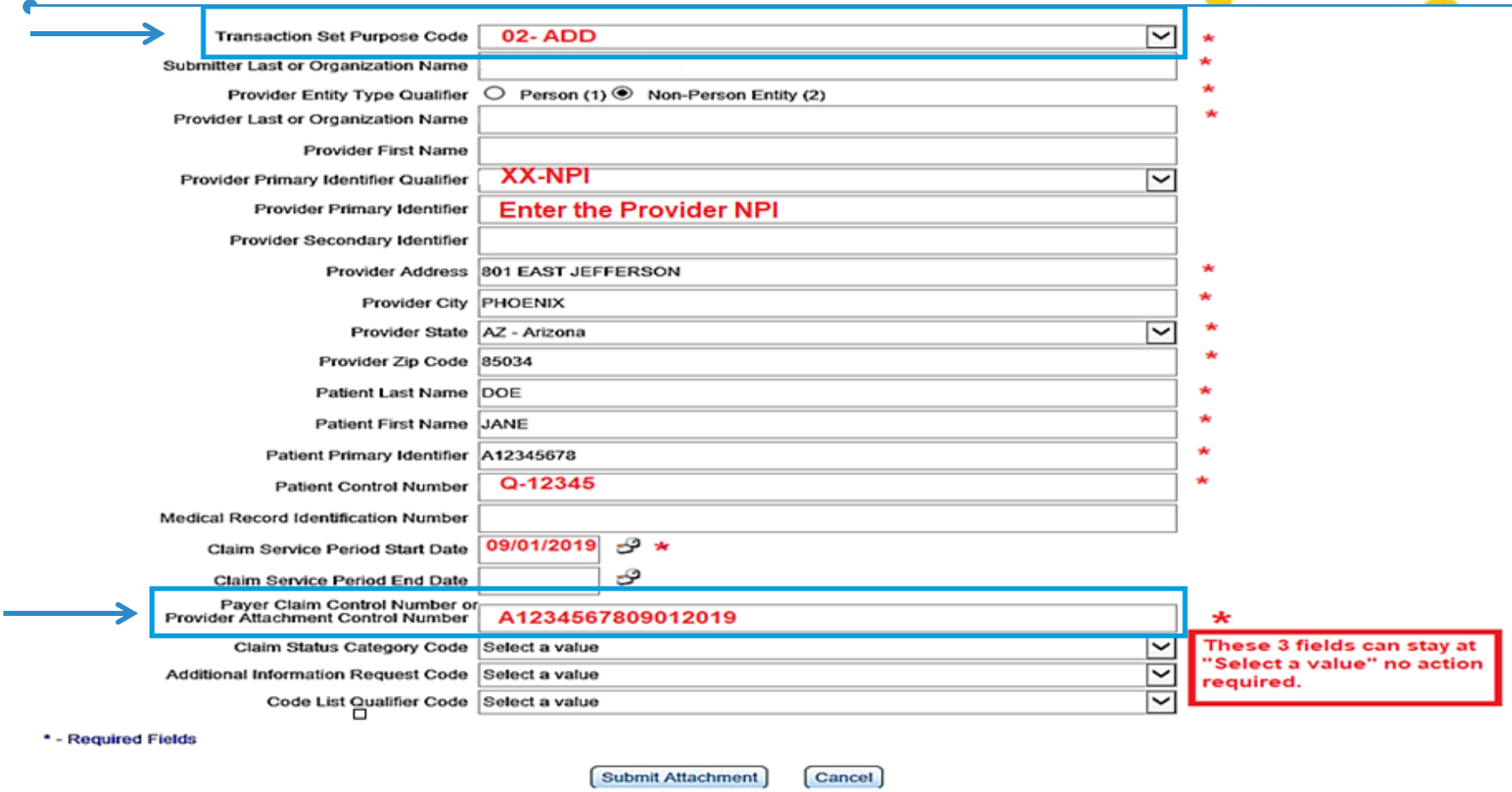
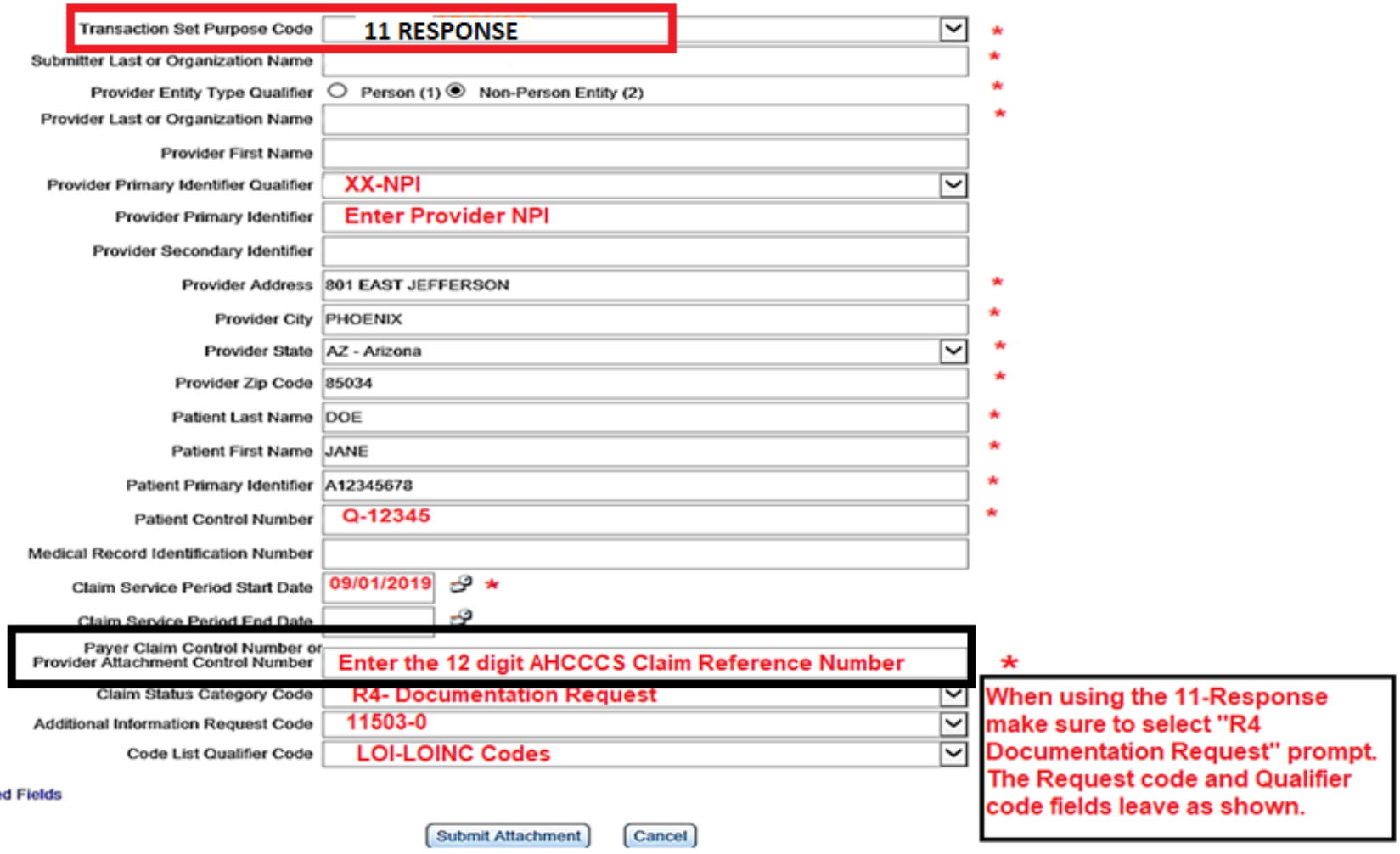
Transaction Set Purpose Code Field: Response type **(02 Add)**
The PWK number must be entered in the Provider Attachment Control Number field.



Transaction Set Purpose Code Field: Response type **(11 Response)** The AHCCCS 12 digit CRN must be entered in the Provider Attachment Control Number field.



IHS/638 Medicare Inpatient Part B Updates:

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Members with Medicare Part B Coverage for Inpatient Stays

Part A (Hospital Insurance) helps cover:

- Inpatient care in hospitals
- Skilled nursing facility care
- Hospice care
- Home health care

Part B (Medical Insurance) helps cover:

- Services from doctors and other health care providers
- Outpatient care
- Home health care
- Durable medical equipment (like wheelchairs, walkers, hospital beds, and other equipment)
- Many preventive services (like screenings, shots or vaccines, and yearly "Wellness" visits)

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Inpatient Medicare Part B Services at a IHS/638 Facility Only.

When a member is eligible for Medicare Part B coverage only and has a inpatient hospital stay claim, the following submission guidelines will apply.

- The provider must submit the eligible Medicare Part B *ancillary charges* to the member's Medicare Part B payer for consideration.
- The Medicare Part B payer will electronically transfer the approved claim to the designated Medicaid payer for consideration of the Medicaid cost sharing (Medicare deductible, coinsurance, copay).
- Based on the members Medicare plan with AHCCCS Medicaid.
- Denied claims are *never* automatically transferred to the Medicaid payer.
- Providers should review Medicare denied claims for action.
- Medicare crossover claims must comply with the Medicaid claim submission requirements including the NPI number for the facility where the service was provided.

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Inpatient Medicare Part B

Bill Types - Medicare Inpatient Part B services may be billed to Medicare with Bill Types 12X, but Bill Types 12X are not valid for Medicaid claims.

Bill Type	Revenue Code Bill the Part B ancillary charges.	Medicare Part B Inpatient	AHCCCS Medicaid
12X	0240	Yes	No

Medicare Crossover claims:

- Only inpatient ancillary charges are submitted to the Medicare Part B payer.
- Bill Type: Medicare allows bill type 12X for inpatient Part B claims.
- Revenue Code: Medicare allows revenue code 0240 for inpatient Part B ancillary charges.
- Total Charges – Part B claims are submitted to Medicare with the total charge amount for the ancillary services only.
- Reimbursement: The Medicare coinsurance due amount will be reimbursed only.

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Claims Correction Tips: Inpatient Medicare Part B Claims to Medicaid

Bill Type	Revenue Code / Room and Board including the Medicare Part B Ancillary Charges	Medicare Part B Inpatient Stay	Medicaid Part B Inpatient Stay
11X	**0100 / 0101**	**No**	**Yes**

When submitting a correction claim, the following information should be included on the claim submission:

- Bill Type Correction 11X
- Revenue Codes 0100 - 0101
- Total Charges – should include R &B plus the total ancillary charges.
- Original Claim Number - Reference the Medicare Crossover claim number for the adjustment.
- Copy of the Medicare Part B Explanation of Benefits.

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Telehealth Services Updates

Telehealth Services Udate

Information previously contained within the Telehealth Training Manual has been transitioned into the following areas:

AHCCCS Medical Policy Manual
https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/320-I.pdf

Fee-for-Service (Chapter 10)
https://www.azahcccs.gov/PlansProviders/Downloads/FFSProviderManual/FFS_Chap10.pdf

IHS/Tribal(Chapter 08) Provider Billing Manuals

https://www.azahcccs.gov/PlansProviders/Downloads/IHS-TribalManual/IHS-Chap08IndivPractitionerSvcs.pdf

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Telehealth Services

AHCCCS covers medically necessary, non-experimental, cost-effective telehealth services provided by an AHCCCS registered provider. There are no geographic restrictions for telehealth; services delivered via telehealth are covered by AHCCCS in rural and urban regions.

Telehealth may include healthcare services delivered via teledentistry, telemedicine, or asynchronous (store and forward).

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Telehealth Services

What services are covered via telehealth?

- The first thing to know is that there is a difference between *real time telehealth (synchronous)* and *store and forward (asynchronous),* and the types of services that that are covered.
  - **Asynchronous** provides access to data after it has been collected, and involves communication tools such as secure email or telehealth software solutions.
  - **Synchronous** is the "real time" two-way interaction between the patient and provider, using interactive audio and video.

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Synchronous Telehealth Services

The following list is not comprehensive, but here are examples of services covered by real time telehealth:

Real Time (Synchronous) Telehealth Service Examples *Not all inclusive list.			
Behavioral Health	Cardiology	Dentistry	Endocrinology
Hematology / Oncology	Home Health	Infectious Diseases	Inpatient Consultations
Medical Nutrition Therapy (MNT)	Neurology	Obstetrics/Gynecology	Oncology / Radiation
Ophthalmology	Orthopedics	Office Visits (adults & pediatrics)	Outpatient Consultations
Pain Clinic	Pathology & Radiology	Pediatrics & Pediatric Subspecialties	Pharmacy Management
Rheumatology	Surgery Follow-Up	Surgery Consultations	

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Asynchronous Telehealth Services

The following services are covered via asynchronous telehealth (store & forward):

Asynchronous (Store & Forward) Telehealth Services *All inclusive list.			
Behavioral Health	Cardiology	Dermatology	Neurology
Ophthalmology	Pathology	Radiology	Infectious Disease

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Telehealth Services

What services are covered via telehealth?

- In order for a service to be covered via telehealth, it must be an AHCCCS covered service rendered by an AHCCCS registered provider, and it must meet the requirements as outlined in AHCCCS Medical Policy and within AMPM 320-I, Telehealth Services.

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Telehealth Services

Where can I find additional information about telehealth services?

- The DFSM Provider Training Web Page has a presentation, including definitions, on telehealth services:
- https://www.azahcccs.gov/Resources/Downloads/DFMSTraining/2019/TelehealthServicesBillingGuidelinesFFSPresentation.pdf

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Stay In Touch!

DFSM publishes a monthly newsletter for providers. It is available online and provides information about the following:

- Claims and billing updates , Billing policies and requirements, System changes, Changes to program benefits

https://www.azahcccs.gov/PlansProviders/RatesAndBilling/FFS/claimsclues.html

Providers are invited to subscribe to DFSM email news alerts regarding changes to the program, claims and billing updates and requirements, system changes, upcoming trainings, forums and other business news.

- Subscribe to receive notifications about upcoming trainings, forums, and important business updates.

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Resources

Stay In Touch!

AHCCCS Provider Training team offers online training to Fee-For-Service (FFS) providers on how to submit claims, prior authorization requests, additional documentation (i.e. the AHCCCS Daily Trip report or requested medical records), etc. using the AHCCCS Online Provider Portal and the Transaction Insight Portal.

The AHCCCS Provider Training team also offers periodic trainings whenever there are significant changes in AHCCCS policy or to the AHCCCS billing manuals. Training questions may be directed to:

ProviderTrainingFFS@azahcccs.gov

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AHCCCS CLAIMS CLUES UPDATES

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- Claims and billing updates
- Billing policies and requirements
- System changes
- Changes to program benefits

https://www.azahcccs.gov/PlansProviders/RatesAndBilling/FFS/claimsclues.html

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DFSM Provider Training

Providers serving AIHP/FFS members, the DFSM Provider Training team can be reached at: Providertrainingffs@azahcccs.gov

Training Topics Offered – Online Provider Portal

Member verification.

How to submit UB-04, CMS 1500 and ADA claims.

How to submit correction/replacement and voids.

Prior Authorization Submission and Status

Transaction Insight Portal (TI).

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Claims Customer Service Team

The Claims Customer Service team can assist with the following items:

- The Status of a Claim and any details regarding that status;
- Providing denial codes and general information regarding denied claims; and
- Providing general information about approved and pended claims.

The Claims Customer Service team is available at (602) 417-7670 Option 4, Monday – Friday from 7:30am – 4:00pm (Phoenix Time).

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Questions?

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Thank You

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