



DFSM Tribal ALTCS

2nd Quarter Case Management Supervisor Meeting

Thursday, April 28th, 2022

WELCOME TO ALL!

Agenda Overview

- **Morning Prayer:** Beatrice Norton, HOPI Tribe
- **Rachel Hunter:** Welcome, PMMIS – Future System Updates
- **Ice Breaker:** Soni and Cheryl
- **System Updates:** Rachel Hunter
- **Soni Fisher:** HCA List
- **Cheryl Begay:** PMMIS Provider Type RF612 & Provider Search PR005
- **Rachel Hunter:** Prior Authorization Data Review
- **Vanessa Torrez:** Prior Authorization Requests, BHRF, CES>100%
- **Closing**



Meeting Reminders



- Please mute your computer's microphone and/or phone when not speaking.
- Use the chat feature to add in comments/questions.
- Ask questions after the speaker has finished.
- Sit back, listen in and enjoy the meeting!
- This meeting will be recorded.



PMMIS Future System Updates

Rachel Conley, Tribal ALTCS Administrator

Arizona's PMMIS (CATS subsystem) - Case Management System

Suggested System Requirements/Needed or Wanted Functions/Features):

- Service Authorizations (new and continuing services) – assist with monitoring of the timely provision of services to members.
- Will also assist when addressing member concerns, as will allow us to see what services member has been authorized for.
- Could we go a step further and have the system also capture assessed services, as sometimes can differ from what is authorized (not cost-effective, member/guardian refusing assessed services or request to hold off on authoring for various reasons, and/or services are already being provided informally, or paid for via another source)?



DFSM Tribal ALTCS Ice Breaker

ICE BREAKER

ALL ABOUT CHOCOLATE

Who doesn't love Chocolate!

Today, we're going to take you back through time and reveal some historical and fun facts about chocolate.

We'll have two games where we'll ask about certain brands of chocolate. You can type your answer in the Meeting Chat and the person with the most correct answers will win that game.



ICE BREAKER

HISTORICAL FACTS ABOUT CHOCOLATE



In Mayan times, cacao beans were used as currency and considered to be worth more than gold dust. To keep the value of the cocoa bean in check, the cultivation of cacao trees was restricted. Otherwise, it would have been too tempting to just grow your own currency!



Daniel Peter, a Swiss chocolatier and entrepreneur, spent eight long years trying to figure out a recipe for milk chocolate that would work. It wasn't until 1875 that he realized that condensed milk was the answer to all his troubles. We're so glad Daniel never gave up!



ICE BREAKER

MORE HISTORICAL FACTS ABOUT CHOCOLATE

M&M's Were Originally Created **To Allow Easy Transport Of Chocolate To The Military** — Fact Of The Day. M&M's were first introduced commercially in 1941 by Forrest Mars, Sr. Forrest got the idea for the candy after observing soldiers eating chocolate pellets with a hard shell during the Spanish Civil War.



By World War II, American soldiers were given M&M's by the United States Army because they were a convenient snack that traveled well in any climate; soon after M&M's were marketed to the public.

ICE BREAKER

FUN FACTS ABOUT CHOCOLATE

The mere smell of chocolate increases theta brain waves, which trigger relaxation. In fact, a study conducted at Hasselt University in Belgium showed that when the scent of chocolate was diffused in bookstores, sales of books increased — especially those of romance novels. Relaxation, indeed!



Chocolate also contains tryptophan, which the brain uses to produce serotonin, a hormone that causes generalized euphoria. So, eating chocolate really does make you happier!

ICE BREAKER – GAME 1

How well do you know your Chocolate?

Q. What candy bar is this?



Answer:



Q. What candy bar is this?



Answer:



Q. What candy bar is this?



Answer:



How well do you know your Chocolate?

Q. What candy is this?



Answer:



Q. What candy bar is this?



Answer:



Q. What candy bar is this?



Answer:



ICE BREAKER – GAME 2

How well do you know your Chocolate?

Q. What candy is known for the slogan “The Great American Candy Bar.”

Answer:



Q. What candy is known for the slogan "Give me a Break"?

Answer:



Q. What candy is known for the slogan "Chocolate, Caramel and a surprising Cookie Crunch"?

Answer:



How well do you know your Chocolate?

Q. What candy is known for “The milk chocolate that melts in your mouth, not in your hand.”

Answer:



Q. What candy is known for the slogan "Two great tastes that taste great together"?

Answer:



Q. What candy is known for the slogan "Get the Sensation"?

Answer:



ICE BREAKER

Thank you for participating in our Tribal ALTCS Ice Breaker.



DFSM Tribal ALTCS

Home Care Agencies (HCA)

Presented by: Soni Fisher, Tribal ALTCS Manager

HOME CARE AGENCIES (HCA)

AHCCCS would like to know if any of the Tribal Programs have a restricted Home Care Agency (HCA) list that you utilize within your Program/Office, and if so, what are the determining factor(s) of which HCA's get on the restricted list?



In specific cases, such as White Mountain Apache, the Tribal government has only a handful of HCA's that they allow to come on to their Tribal lands, therefore a restricted list is appropriate.

HOME CARE AGENCIES (HCA)

We received a call from an HCA provider who alleged that some Case Managers have told ALTCS members that they have a restricted list of HCA's that they can refer the member to. The provider indicated that their agency is apparently not on the "List", and therefore as they do not receive as many referrals as other HCA agencies.



In addition, the provider indicated that they understand that some CM's have relatives who own or work at specific HCA's and that the CM is referring members to that provider.

REPORT FRAUD, WASTE & ABUSE, OR MEMBER QUALITY OF CARE

Who Can Report Fraud, Waste & Abuse, or Member Quality of Care Concerns?

Absolutely anyone can report fraud, waste & abuse, or member quality of care concerns.



If an HCA or a Tribal CM believes that a member's health care is being compromised, or if they believe fraud is being perpetrated, either the HCA or the Tribal CM have the option to submit a QOC or OIG complaint and it will be investigated.

How to Report Fraud, Waste or Abuse of the Program

<https://www.azahcccs.gov/Fraud/ReportFraud/>

How to Report Concerns About the Quality of Care Received

<https://www.azahcccs.gov/ACMS/>

ANY QUESTIONS?

THANK YOU!!

10-minute BREAK



DFSM Tribal ALTCS

PMMIS Provider Type RF612 & Provider Search PR005

Cheryl Begay, Tribal ALTCS CM Coordinator

PMMIS Provider Type Search RF612

- If a search needs to be performed for a specific provider type, CM may use the PMMIS Screen- RF612.
- There are 12 pages of 14 types per page. Note: TCMs will not use all these types of providers.
- Use F8 to toggle from page to page to find the CODE (left column and the DESCRIPTION of the type of provider/s you are searching for)

Code & Description



Home Health Agency

TR: RF612 ACT: I AHCCCS - REFERENCE USER ID: 460 04/26/22
 NTR: PROVIDER TYPE CODE 14:50:07
 RF00L222

SORTED BY CODE

CODE	DESCRIPTION	BEG DATE	END DATE	LAST MOD	USR
A1	LEVEL II BEHAV HTH RESID (17+BEDS) (IMD)	10/03/01	10/03/01	01/14/02	F67
A2	LEVEL III BEHAVIORAL HTH RESIDENTIAL	10/03/01	09/30/13	09/30/13	7F0
A3	COMMUNITY SERVICE AGENCY	10/03/01	99/99/99	08/16/01	F67
A4	LIC INDEP SUBSTANCE ABUSE COUNS (LISAC)	07/01/04	99/99/99	03/11/04	F67
A5	BEHAVIORAL HEALTH THERAPEUTIC HOME	10/03/01	99/99/99	08/20/07	MC1
A6	RURAL SUBSTANCE ABUSE TRANSITIONAL AGCY	10/03/01	99/99/99	08/16/01	F67
A7	RESPITE	10/01/82	99/99/99	08/06/02	64I
A8	IHR-INDIVIDUAL HOME RESPITE	07/01/14	99/99/99	07/07/15	567
BC	BOARD CERTIFIED BEHAVIOR ANALYST	10/01/16	99/99/99	05/12/16	567
B1	RESID TRTMENT CTR-SECURE (17+BEDS) (IMD)	10/03/01	99/99/99	08/16/01	F67
B2	RESID TRTMENT CTR-NON-SECURE (1-16 BEDS)	10/03/01	99/99/99	08/16/01	F67
B3	RESID TRTM CTR-NON-SECURE (17+BEDS) (IMD)	10/03/01	99/99/99	08/16/01	F67
B5	SUBACUTE FACILITY (1-16 BEDS)	10/03/01	99/99/99	08/16/01	F67
B6	SUBACUTE FACILITY (17+BEDS) (IMD)	10/03/01	99/99/99	08/16/01	F67

PF: 1=HLP 2=RTN 3=CLR 4=MSG 7=UP 8=DWN 9=RPT 10=TOP 11=BOT 12=ESC

TR: RF612 ACT: I AHCCCS - REFERENCE USER ID: 460 04/26/22
 NTR: PROVIDER TYPE CODE 14:34:10
 RF00L222

SORTED BY CODE

CODE	DESCRIPTION	BEG DATE	END DATE	LAST MOD	USR
16	CHIROPRACTOR	10/01/82	99/99/99	12/12/88	61M
17	NATUROPATHIC PHYSICIAN	10/01/82	99/99/99	09/27/19	567
18	PHYSICIANS ASSISTANT	10/01/82	99/99/99	04/27/89	Y1M
19	REGISTERED NURSE PRACTITIONER	10/01/82	99/99/99	04/27/89	Y1M
20	RESPIRATORY THERAPIST	10/01/82	99/99/99	04/27/89	Y1M
21	MASSAGE THERAPIST	10/01/82	99/99/99	08/26/02	64I
22	NURSING HOME	10/01/82	99/99/99	04/27/89	Y1M
23	HOME HEALTH AGENCY	10/01/82	99/99/99	04/27/89	Y1M
24	PERSONAL CARE ATTENDANT	10/01/82	12/31/14	01/29/15	0D4
25	GROUP HOME (DEVELOPMENTALLY DISABLED)	10/01/82	99/99/99	04/27/89	Y1M
26	MIPS SPEECH THERAPIST/AUDIOLOGISTS	07/01/00	04/01/08	05/22/08	MC1
27	ADULT DAY HEALTH	10/01/82	99/99/99	09/28/89	L46
28	NON-EMERGENCY TRANSPORTATION PROVIDERS	10/01/82	99/99/99	12/12/88	61M
29	COMMUNITY/RURAL HEALTH CENTER	10/01/14	99/99/99	04/01/14	0D4

PF: 1=HLP 2=RTN 3=CLR 4=MSG 7=UP 8=DWN 9=RPT 10=TOP 11=BOT 12=ESC

RF612 Provider Type



PR005 Provider Search

- Example: TCM is searching for ACTIVE AHCCCS Home Health Agencies in Arizona
- Go to PRO05, ENTER **A** (active) for STATUS.
- ENTER **23** for TYPE (provider).
- ENTER **AZ** for ST (state).
- *Happy Searching!*

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9050 PLACE 'S' BESIDE DESIRED PROVIDER AND PRESS ENTER
TR: PRO05 I          AHCCCS - PROVIDER          USER ID: 460          04/26/22
NTR: _____    PROVIDER SEARCH          15:40:41
                                     PR01L005
                                     23 AZ
SEL PROVIDER NAME          PRV ID  STATUS  TAX ID  SSN  TYPE ST
MEDICARE ID: _____  NPI: _____

_ (RUDLOFF) SCHREIBER/JESSI 300035  A 01          303-11-7803 15  AZ
  1821510074
_ #A1 DIABETES & MED SPPLY  912927  A 01          30  FL
  1992799787
_ #20/MARICOPA UNIFIED SCH 607724  A 01          238-69-0684 93  AZ
_ @ HEART HOME CARE        438330  T 51          40  AZ
_ @ HEART HOME CARE        450969  T 31          01  AZ
  1306076914
_ @ HOME HEALTH CARE       616482  T 96          40  AZ
_ A + AMBULANCE, INC.      401802  T 31          06  WA

PF: 1=HLP 2=RTN 3=CLR 4=MSG          7=UP 8=DWN 9=RPT 10=TOP 11=BOT 12=ESC

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ANY QUESTIONS?

THANK YOU!!



Tribal ALTCS Prior Authorization Requests Data Review

Rachel Conley, Tribal ALTCS Administrator

PRIOR AUTHORIZATION REQUEST DATA

Tribal ALTCS Comments	SUMMARY
DUPLICATE	165
MISSING INFORMATION	208
MULTIPLE MEMBERS	4
NO PA REQUIRED	78
PA APPROVED	832
PA UNDER REVIEW	24
PENDED PA	37
BLANK	30
TOTAL	1378

Assignment	DUPLICATE	MISSING INFORMATION	MULTIPLE MEMBERS	NO PA REQUIRED	PA APPROVED	PA UNDER REVIEW	PENDE PA	(blank)	Grand Total
>80% CES	2				9	1			12
100% CES						1			1
ALF BH	34	28		4	70	1		4	141
CONTRACTOR CHANGE	1							1	2
DME	47	137	4	14	261	2	28	16	509
E1399		1		4	2				7
HOMEMOD	4	11		7	4	13	6	4	49
MISC					2				2
OPEN LINE REQUEST	24	15		39	330	4	1	1	414
OUT OF STATE PLACEMENT	6	4			27				37
SNF	47	12		10	127	2	2	4	204
Grand Total	165	208	4	78	832	24	37	30	1378




Tribal ALTCS Prior Authorization Requests Report, BHRF, CES > 100%

Vanessa Torrez, Tribal ALTCS Nurse



WHAT IS PRIOR AUTHORIZATION ?

Prior Authorization (PA) is a process by which the AHCCCS Division of Fee-For-Service (FFS) Management (DFSM) determines in advance whether a service that requires prior approval will be covered, based on the initial information received. PA may be granted provisionally (as a temporary authorization) pending receipt of required documentation to substantiate compliance with AHCCCS criteria. PA is not a guarantee of payment.



CES H0018 SHORT TERM BEHAVIORAL HEALTH RESIDENTIAL FACILITY (BHRF) Policy

- [310-B](#) TITLE XIX/XXI BEHAVIORAL HEALTH SERVICE BENEFIT
- [320-O](#) BEHAVIORAL HEALTH ASSESSMENTS, SERVICE, AND TREATMENT PLANNING
- [320-V](#) BEHAVIORAL HEALTH RESIDENTIAL FACILITIES
- [1620-C](#) COST EFFECTIVENESS STUDY STANDARD
- and [1620-E](#) SERVICE PLAN MONITORING AND REASSESSMENT STANDARD

(BHRF) Prior Authorization Documentation Requirements

- Documentation has to be submitted **prior** to the Behavioral Health Residential Facility (BHRF) admission. If admission is urgent and documents are from the crisis clinic or member's treatment provider, or the TRBHA, then admission notification must be sent to AHCCCS Division of Fee-For-Service Management (DFSM) on the day of the admission.
- Admission date has to be written on the documents.
- The documents must be completed by the outpatient or inpatient treatment team (not the admitting BHRF) and must include:
 - Behavioral Health Assessment done by the Behavioral Health Provider (BHP) or cosigned by the BHP
 - Treatment Plan that has recommendation for the member to be admitted to the BHRF
- Members have to receive treatment at the BHRF for the BHRF to submit claims for payment. Members cannot receive treatment from the outpatient providers and only live in the BHRF. For example, if the member goes to the Day Hospital Treatment Program or Intensive Outpatient and only comes to the BHRF to eat and sleep, then the BHRF cannot submit the claim for payment. The BHRF can bill code H0018 only for full treatment day. If a member needs additional treatment done by the outpatient provider, this must be written in the Treatment Plan.
- The Tribal ALTCS Case Manager must fax to the DFSM Tribal ALTCS Nurse to review and determine if the H0018 Setting is justified.

CONTINUED STAY CRITERIA



New CES H0018
Overcost Packet to be
faxed to the DFSM Tribal
ALTCS Nurse for
review/approval.



BHRF Full Behavioral
Health Assessment
within past Year.



Updated
BHRF Treatment Plan
within past 30 days



7
Day Treatment Schedule



Full 7 days of Treatment
notes by BHRF ONLY.
(with group topics,
connection to the
member's Treatment
Plan and details of
member's participation)

CES >100% Packet

CES OVERCOST CHECKLIST

PACKET INFORMATION		
Member Name:		
Case Manager		
AHCCCS ID :		
Date Received		
Date Approved:		
CHECKLIST		
<input type="checkbox"/>	COVER LETTER	
<input type="checkbox"/>	REVIEW ASSESSMENT (6 pages)	Copy of most recent service assessment indicating member's progress and need for more or less services.
<input type="checkbox"/>	Case Notes	Relevant case notes to support service reduction
<input type="checkbox"/>	UAT (Universal Tool Assessment)	
<input type="checkbox"/>	HNT (HCBS Member Needs Assessment Tool)	
<input type="checkbox"/>	AHCCCS ALTCS Member Service Plan (SIGNED & DATED)	By member representative
<input type="checkbox"/>	CA160 within 30 days of request?	
<input type="checkbox"/>	Do Services match the CA160 (CES Screen)?	
<input type="checkbox"/>	CES LOC Amount (from current rates)	
<input type="checkbox"/>	CES Percentage %.	
<input type="checkbox"/>	Is the % calculated correctly?	
<input type="checkbox"/>	CES between \$1 and 100%	Prepare letter of approval
<input type="checkbox"/>	CES over 100% due to transportation only?	Calculate CES w/o transportation. If under 80%, prepare letter of approval.
<input type="checkbox"/>	CES over 100% - DO NOT CONTINUE TO AUTHORIZE SERVICES.	Discuss with ALTCS CM Manager to obtain approval. Then prepare appropriate letter.
<input type="checkbox"/>	Copy of NOA	If member/rep were not in agreement with the changes in services
Evaluator Comments:-		

- Any H0018 Short-Term Behavioral Health Residential Facility (BHRF) services must have a CES H0018 Overcost packet faxed in to the DFSM Tribal ALTCS Nurse for review/approval to determine if the H0018 setting is justified. H0018 services will only be approved on a 90-day basis.

Review PMMIS, Cost Effectiveness Study CA160 screen

Which identifies the Home Community Based Services Percentage according to current level of care that the assigned tribal case manager has assessed including all services that are medically necessary for the member's current placement .

```
TR: CA160                AHCCCS - LONG TERM CARE                04/27/22
NTR:  ___ I  _____  CMP - COST-EFFECTIVENESS STUDY            11:20:12
                                                                LT02L110

CES DATE: 01/08/2022  ASSESS DATE: _____
NAME: _____
WORKER ID: _____  CURR CSMGR: _____  LATEST ACN: _____

LOC:  INST GRS COST: $    7155.30  SOC: $    0.00  NET COST: $    7155.30
      HCBS GRS COST: $    7658.70  SOC: $    0.00  NET COST: $    7658.70

SERVICE  UNIT          MONTH 1          MONTH 2          MONTH 3          AVG COST
CODE MOD  COST          UNITS          COST          UNITS          COST          UNITS          COST          PER MONTH
H0018  _    255.29    30    7658.70    30    7658.70    30    7658.70    7658.70
_____  _____  _____  _____  _____  _____  _____  _____  _____
_____  _____  _____  _____  _____  _____  _____  _____  _____
_____  _____  _____  _____  _____  _____  _____  _____  _____
_____  _____  _____  _____  _____  _____  _____  _____  _____

COMMENTS: N  CUR PLACEMENT: H  DATE: 08/06/2020  REASON: 11
HCBS PRCNT : 107%  SSI PRCNT: _____
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TR: CA160

AHCCCS - LONG TERM CARE

04/27/22

NTR: I

CMP - COST-EFFECTIVENESS STUDY

11:20:12

LT02L110

CES DATE: 01/08/2022 ASSESS DATE:

NAME: [REDACTED] AHCCCS ID: [REDACTED]

WORKER ID: [REDACTED] CURR CSMGR: [REDACTED] LATEST ACN: [REDACTED]

LOC:	INST	GRS COST:	\$	7155.30	SOC:	\$	0.00	NET COST:	\$	7155.30
	HCBS	GRS COST:	\$	7658.70	SOC:	\$	0.00	NET COST:	\$	7658.70

SERVICE	UNIT	MONTH 1	MONTH 2	MONTH 3	AVG COST				
CODE	MOD	COST	UNITS	COST	UNITS	COST	UNITS	COST	PER MONTH
H0018		255.29	30	7658.70	30	7658.70	30	7658.70	7658.70
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

HCBS PRCNT : 107% COMMENTS: N CUR PLACEMENT: H DATE: 08/06/2020 REASON: 11
 BSI PRCNT: _____

Training Presentations

https://www.azahcccs.gov/Resources/Training/DFSM_Training.html

Behavioral Health
Residential Facilities
(BHRF) - Prior
Authorization
Requirements

Behavioral Health
Residential Facility
(BHRF) Policy
Overview



Tribal ALTCS Nurse Contact Information:

(602) 417-4169 Direct Line

(602) 254-2426 Fax

PA Office: 602-417-4400

Vanessa.Torrez@azahcccs.gov

Thank you
Any Questions?

Tribal Plan Recognitions



“Honor your Elders”
For they have the Wisdom
to Teach what we have not
learned yet.