

**DATE:** October 31, 2019  
**To:** Holders of the AHCCCS Medical Policy Manual  
**FROM:** Division of Health Care Management Contracts and Policy Unit  
**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](mailto:DHCMContractsandPolicy@azahcccs.gov).

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**UPDATES AND REVISIONS TO THE AHCCCS MEDICAL POLICY MANUAL (AMPM)**

**[AHCCCS Medical Policy Manual \(AMPM\)](#)**

**AMPM POLICY 100, MANUAL OVERVIEW**

AMPM POLICY 100 was revised to incorporate definitions that are used throughout the various ACOM and AMPM Policies. Language was also added to describe information found in both manuals.

**AMPM EXHIBIT 300-2B, AHCCCS COVERED SERVICES BEHAVIORAL HEALTH NON-TITLE XIX/XXI SERVICES**

AMPM Exhibit 300-2B was revised to reflect AHCCCS' behavioral health service coverage. The Exhibit was also updated to change the Title from *AHCCCS Covered Services Behavioral Health Non-Title XIX XXI Persons*.

**AMPM POLICY 310-B, TITLE XIX/XXI BEHAVIORAL HEALTH SERVICE BENEFIT**

AMPM Policy, 310-B was revised to include Title XIX/XXI-specific covered behavioral health service benefit information taken from the Covered Behavioral Health Services Guide (CBHSG) and was updated to reflect AHCCCS' behavioral health service coverage. The Policy was further revised after being posted to the *Approved but Not Yet Effective* portion of the AHCCCS website to include the below information:

- ICD Diagnostic Codes
- Provider Travel
- To clarify when more than one provider can bill for services rendered; noted throughout Policy
- Use of modifier U1 for Case Management used to facilitate a CFT
- Additional SOAR service clarifications
- Use of HK modifier when provider case management is utilized
- Case Management limitations

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**AMPM POLICY 310-L, HYSTERECTOMY**

AMPM Policy 310-L was revised to clarify the requirements for hysterectomy vs. sterilizations. The 30 day waiting period for a hysterectomy was also removed.

**AMPM POLICY 320-I, TELEHEALTH**

AMPM Policy 320-I was also updated to change the Title from Telehealth and Telemedicine due to telemedicine being one type of Telehealth. Clarification was added surrounding what is covered under Telehealth, including Asynchronous (store and forward), Telemedicine, and Teledentistry.

**POST TRIBAL CONSULTATION NOTIFICATION/PUBLIC COMMENT CHANGES:**

AMPM Policy 320-I was revised to further clarify original changes after being posted for Tribal Consultation Notification/Public Comment on August 14, 2019.

**AMPM POLICY 320-S, BEHAVIOR ANALYSIS SERVICES**

AMPM Policy 320-S is a new Policy establishing requirements for Behavior Analysis Services including delivery and treatment.

**POST TRIBAL CONSULTATION NOTIFICATION/PUBLIC COMMENT CHANGES:**

AMPM Policy 320-S was revised to further clarify original language after being posted for Tribal Consultation Notification/Public Comment on August 7, 2019. Changes included, the title was formerly named Applied Behavior Analysis. In addition, the following terms in Definitions were revised:

- Applied Behavior Analysis (ABA),
- Behavior Analyst,
- Board Certified Behavior Analyst Doctoral (BCBA-D),
- Licensed Behavior Analyst (LBA).

Changes are also found in Section III. were also revised:

- A. Program Descriptions,
- B. Provider Qualifications,
- C. ABA Assessments,
- D. ABA Treatment Planning Service Administration,
- E. Discontinuation of Services.

**AMPM 320-T, NON-TITLE XIX/XXI BEHAVIORAL HEALTH SERVICES BENEFIT**

AMPM Policy, 320-T was revised to include Non-Title XIX/XXI-specific covered behavioral health service benefit information taken from the Covered Behavioral Health Services Guide (CBHSG) and was updated to reflect AHCCCS' behavioral health service coverage. This Policy was also revised to include Care Coordination requirements of all involved entities to ensure each member's continuity of care. The Policy was further revised after being posted to the *Approved but Not Yet Effective* portion of the AHCCCS website to include the below information regarding ICD Diagnostic Codes and Room and Board limitation:

- ICD Diagnostic Codes
- Room and Board billing limitations

The following attachments are newly added to AMPM 320-T. For reporting requirements related to SABG and MHBG, RBHAs shall utilize the following templates for the corresponding deliverable submissions identified in each applicable Contract or IGA/ISA. Applicable deliverables shall be submitted as specified in Contract or IGA/ISA.

- **ATTACHMENT A, CHARITABLE CHOICE – ANTI-DISCRIMINATION NOTICE TO INDIVIDUALS RECEIVING SUBSTANCE USE DISORDER TREATMENT SERVICES**
- **ATTACHMENT B, SERIOUS EMOTIONAL DISTURBANCE (SED) PROGRAM STATUS REPORT – MENTAL HEALTH BLOCK GRANT (MHBG) SERIOUS EMOTIONAL DISTURBANCE (SED) GRANT**
- **ATTACHMENT C, FIRST EPISODE PSYCHOSIS PROGRAM STATUS REPORT (ANNUALLY)**
- **ATTACHMENT C-1, FIRST EPISODE PSYCHOSIS PROGRAM STATUS REPORT (QUARTERLY)**
- **ATTACHMENT D, INDEPENDENT CASE REVIEW (ICR) PEER REVIEW MEMBER CHARTS**
- **ATTACHMENT E, SUBSTANCE ABUSE BLOCK GRANT (SABG) HIV ACTIVITY REPORT**
- **ATTACHMENT F, SUBSTANCE ABUSE BLOCK GRANT (SABG) HIV SITE VISIT REPORT**
- **ATTACHMENT F-1, OXFORD HOUSE FINANCIAL REPORTS**
- **ATTACHMENT G, SUBSTANCE ABUSE BLOCK GRANT (SABG) AGREEMENTS REPORT**
- **ATTACHMENT H, OXFORD HOUSE MODEL REPORT**
- **ATTACHMENT I, SUBSTANCE ABUSE BLOCK GRANT (SABG) PRIORITY POPULATION WAITLIST REPORT**
- **ATTACHMENT J, SUBSTANCE ABUSE BLOCK GRANT (SABG) CAPACITY MANAGEMENT REPORT**
- **ATTACHMENT K, SUBSTANCE ABUSE BLOCK GRANT (SABG), PREVENTION, MENTAL HEALTH BLOCK GRANT (MHBG) PLAN**

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**AMPM POLICY 320-U, PRE-PETITION SCREENING, COURT ORDERED EVALUATION, AND COURT ORDERED TREATMENT**

AMPM Policy 320-U was revised to align with the March 12, 2019 email that was sent out to the plans. Language was also revised to align with the AHCCCS COE and COT Frequently Asked Questions (FAQs) that are found on the AHCCCS website. Contractor reporting requirements are clarified for the COE and COT processes, tracking, and reporting with the updated references added. The following Attachments were reserved due to them being generated Court documents.

- Attachment A - Application for Involuntary Evaluation
  - Attachment B - Application for Emergency Admission for Evaluation
  - Attachment C - Petition for Court-Ordered Evaluation
  - Attachment D - Petition for Court-Ordered Treatment Gravely Disabled Person
  - Attachment E - Affidavit
  - Attachment F - Flow Chart Recognition of Tribal Court Order Process
  - Attachment G - Application for Voluntary Evaluation
  - Attachment H - COE Deliverable Template
  - Attachment I - COT Deliverable Template
- **ATTACHMENT A, COE DELIVERABLE TEMPLATE**  
Attachment A, COE Deliverable Template, formerly Attachment H, COE Deliverable Template, was revised to clarify language pertaining to when the fiscal quarter starts and ends and received minor formatting changes.
- **ATTACHMENT B, A.R.S. §12-136 FLOW CHART, RECOGNITION OF TRIBAL COURT ORDER PROCESS**  
Attachment B, A.R.S. §12-136 Flow Chart, Recognition Of Tribal Court Order Process, formerly, Attachment F - Flow Chart Recognition of Tribal Court Order Process was revised for minor formatting updates.

**POST TRIBAL CONSULTATION NOTIFICATION/PUBLIC COMMENT CHANGES:**

AMPM Policy 320-U was revised to further clarify original changes posted for Tribal Consultation Notification/Public Comment on August 30, 2019.

**AMPM POLICY 541, COORDINATION OF CARE WITH OTHER GOVERNMENT AGENCIES**

AMPM Policy 541 was revised to include DDD integration of behavioral health. The Policy includes language pertaining to Coordination with schools and to include references to guidance documents.

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**AMPM 610, AHCCCS PROVIDER QUALIFICATIONS**

AMPM Policy 610 was revised to align with the AHCCCS Complete Care (ACC) RFP YH19-0001, that was effective October 1, 2018. Clarification regarding when AHCCCS will rely on Medicare's screening information of providers based on categorical risk was added. In addition, new requirements for Fingerprint-based Criminal Background Check (FCBC) were updated as a result of changes found in 42 CFR 455.434(b).

- **ATTACHMENT A, AHCCCS PROVIDER TYPES**

Attachment A was revised to include Provider Type C5-638 Federally Qualified Health Center (FQHC).

- **ATTACHMENT B, AHCCCS PROVIDER TYPES SCREENING TOOL**

Attachment B was revised to update the FCBC information that was changed according to 42 CFR 455.434(b), the requirement to submit fingerprints applies to both the "high" risk provider and any person with a five percent or more direct or indirect ownership interest in the provider, as those terms are defined in 42 CFR 455.101. In addition Provider Type C5-638 Federally Qualified Health Center (FQHC) was incorporated into Attachment B to align with policy.

**AMPM POLICY 680-C, PRE-ADMISSION SCREENING AND RESIDENT REVIEW (PASRR)**

AMPM Policy 680-C was revised with language updates to include the use of telehealth for the completion of Level II Evaluations for individuals suspected to have mental illness.

- **ATTACHMENT A, ARIZONA PRE-ADMISSION SCREENING AND RESIDENT REVIEW (PASRR) LEVEL I SCREENING TOOL**

Attachment A was revised to replace fax numbers to current email addresses, include instructions for completing form, and updating the Medical Power of Attorney to be Health Care Decision Maker to align with Policy.

- **ATTACHMENT B, LEVEL II PASRR PSYCHIATRIC EVALUATION**

Attachment B was revised for minor formatting updates.

- **ATTACHMENT C, PRE-ADMISSION AND RESIDENT REVIEW (PASRR) INVOICE**

Attachment C was revised for minor formatting updates.

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**AMPM 963, PEER AND RECOVERY SUPPORT SERVICE PROVISION REQUIREMENTS.**

AMPM Policy 963 was revised to include DDD integration of behavioral health. The title was changed from Peer and Recovery Support Training Requirements. In addition, language was revised to incorporate the newly added reporting templates.

- **ATTACHMENT A, PEER RECOVERY SUPPORT SPECIALIST INVOLVEMENT IN SERVICE DELIVERY-ACC REPORT**

Attachment A is a new template for the ACC Contractors to submit information noting Peer/Recovery Support Specialist (PRSS) involvement in service delivery.

- **ATTACHMENT B, PEER RECOVERY SUPPORT SPECIALIST INVOLVEMENT IN SERVICE DELIVERY-ALTCS REPORT**

Attachment B is a new template that the ALTCS Contractors shall utilize to submit information noting Peer/Recovery Support Specialist (PRSS) involvement in service delivery.

- **ATTACHMENT C, PEER RECOVERY SUPPORT SPECIALIST INVOLVEMENT IN SERVICE DELIVERY-RBHA REPORT**

Attachment C is a new template that the RBHA Contractors shall utilize to submit information noting Peer/Recovery Support Specialist (PRSS) involvement in service delivery.

- **ATTACHMENT D, DEVELOPMENT REFERENCES**

Attachment D is new and provides suggested curriculum development references.

- **ATTACHMENT E, PEER RECOVERY SUPPORT SPECIALIST INVOLVEMENT IN SERVICE DELIVERY-DDD REPORT**

Attachment E is a new template that the DDD Contractors shall utilize to submit information noting Peer/Recovery Support Specialist (PRSS) involvement in service delivery.

**POST TRIBAL CONSULTATION NOTIFICATION/PUBLIC COMMENT CHANGES:**

AMPM Policy 963 was revised to further clarify original changes after being posted for Tribal Consultation Notification/Public Comment on September 05, 2019.

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**AMPM 964, CREDENTIALLED PARENT FAMILY SUPPORT REQUIREMENTS**

AMPM Policy 964 was revised for the DDD integration of behavioral health. AMPM Policy 964 was formerly named ‘Parent Family Support Provider Training, Credentialing, and Supervision Requirements’ and is now ‘Credentialed Parent/Family Support Requirements’. The policy title was revised to better align with clarifications advising that becoming a credentialed Parent/Family Support Provider is not mandatory, and that Providers may elect to become Credentialed Parent/Family Support Providers. The Policy was revised to incorporate the reporting templates and reporting requirements for all lines of business.

- **ATTACHMENT A- CREDENTIALLED PARENT FAMILY SUPPORT SPECIALIST INVOLVEMENT IN SERVICE DELIVERY-ACC REPORT**

Attachment A is a new template for the ACC Contractors to submit information noting Credentialed Parent/Family Support involvement in service delivery.

- **ATTACHMENT B- CREDENTIALLED PARENT FAMILY SUPPORT SPECIALIST INVOLVEMENT IN SERVICE DELIVERY -ALTCS REPORT**

Attachment B is a new template for the ALTCS Contractors to submit information noting Credentialed Parent/Family Support involvement in service delivery.

- **ATTACHMENT C- CREDENTIALLED PARENT FAMILY SUPPORT SPECIALIST INVOLVEMENT IN SERVICE DELIVERY-RBHA REPORT**

Attachment C is a new template for the RBHA Contractors to submit information noting Credentialed Parent/Family Support involvement in service delivery.

- **ATTACHMENT D- CREDENTIALLED PARENT FAMILY SUPPORT SPECIALIST INVOLVEMENT IN SERVICE DELIVERY DDD REPORT**

Attachment D is a new template for the DDD Contractors to submit information noting Credentialed Parent/Family Support involvement in service delivery.

**POST TRIBAL CONSULTATION NOTIFICATION/PUBLIC COMMENT CHANGES:**

AMPM Policy 964 was revised to further clarify original changes after being posted for Tribal Consultation Notification/Public Comment on September 05, 2019.

**AMPM POLICY 965, COMMUNITY SERVICE AGENCIES**

AMPM Policy 965 is a new Policy that was formerly found in AMPM 961 section C. The Policy establishes expectations for the provision of services to members. AHCCCS’ role in the credentialing process has been removed. Contractors shall maintain the credentialing

standards for AHCCCS Provider Registration, and establish requirements for Contractors to collaborate and coordinate credentialing and quality monitoring processes, streamline both the credentialing and quality monitoring processes, and to align direct care staff requirements with AHCCCS Workforce Development as specified in ACOM Policy 407.

○ **ATTACHMENT A, INITIAL APPLICATION AND CREDENTIALING AMENDMENT REQUEST**

Attachment A was formerly AMPM Policy 961, Exhibit 1, County Service Agency Application. The Application was revised to clarify directions on submission of the credentialing amendment.

○ **ATTACHMENT B, DOCUMENTATION STANDARDS**

Attachment B is new and includes general requirements for documentation standards for Initial/desk audits, renewal/onsite review, and amendments

○ **ATTACHMENT C, CRIMINAL HISTORY AFFIDAVIT**

Attachment C was formerly AMPM Policy 961, Exhibit 3 and was revised for minor formatting updates.

○ **ATTACHMENT D, SELF DECLARATION OF CRIMINAL HISTORY**

Attachment D was formerly AMPM Policy 961, Exhibit 4 and was revised for minor formatting updates.

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**PREVIOUSLY ADDED APPROVED NOT YET EFFECTIVE**

**AMPM POLICY 1200, RESERVED**

**AMPM POLICY 1300, Exhibit 1300-1, RESERVED**

**AMPM POLICY 1300, Exhibit 1300-4 RESERVED**

**AMPM POLICY 1300, EXHIBIT 1300-4 - RESERVED**

**AMPM POLICY 1300, RESERVED**

**AMPM POLICY 1310, RESERVED**

**AMPM POLICY 1311, RESERVED**



**AMPM POLICY 1312, RESERVED**

**AMPM POLICY 1313, RESERVED**

**AMPM POLICY 1321, RESERVED**

**AMPM POLICY 1322, RESERVED**

**AMPM POLICY 1323, RESERVED**

**AMPM POLICY 1324, RESERVED**