

DATE: January 20, 2022
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.

The Contract and Policy Unit will begin 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 with each Policy. The transitioned policies have a 10/01/21 effective date.

[INFORMATION REGARDING COVID-19](#)

In response to Medicaid-related questions from providers and contractors arising from the COVID-19 pandemic, AHCCCS has developed a list of Frequently Asked Questions (FAQs) Regarding Coronavirus Disease 2019 (COVID-19) which is updated regularly. It is important to note that there are instances where the information presented in the CMS-approved flexibilities and COVID-19 FAQs does not align with provisions set forth by the AHCCCS Medical Policy Manual (AMPM). In these instances, the CMS-approved flexibilities and FAQs take precedence and are controlling.

[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](#)

Consistent with the Arizona Management System (AMS) principles to streamline processes and provide consistency in Policy Development, the Contract and Policy Unit has developed a new *AHCCCS Contract and Policy Dictionary*. The Dictionary provides a centralized location for definitions that are currently found in the various ACOM and AMPM Policies. The Contract and Policy Dictionary can be found on the AHCCCS website under Resources – Guides-Manuals-Policies. Although currently the Dictionary reflects only definitions from the ACOM and AMPM, in the future it will include definitions from the Contracts as well. Definitions found in the Dictionary will be removed from the ACOM and AMPM Policies as they are published and a hyperlink to the AHCCCS Contract and Policy Dictionary will be included. Some policies have specific terms/definitions that will need to apply to the respective Policy only; those terms/definitions will remain in the Policy and will include a statement indicating the term/definition is applicable 'For purposes of this Policy' only.

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

[AHCCCS RELATED ACRONYMS](#)

Common AHCCCS Related Acronyms can be found on the AHCCCS website under AHCCCS Info – About Us.

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 1620-F - TRIBAL ALTCS FEE-FOR-SERVICE STANDARDS

AMPM Policy 1620-F has been revised to apply a name change of the Policy, it has also received a general five year review. Minor clarification and formatting were completed throughout the policy to clarify case management standards when obtaining prior authorization as well as updates CA165 and Client Assessment and Tracking System (CATS) applicability.

AMPM POLICY 1620-L – CASE FILE DOCUMENTATION STANDARD

AMPM Policy 1620-L was revised to add language to require specialized services be documented in the member’s case management file and clarified record retention requirements. Duplicative language was removed and references were updated throughout the policy. Additional changes include minor grammatical and formatting updates.

POST TRIBAL CONSULTATION NOTIFICATION AND PUBLIC COMMENT CHANGES:

AMPM Policy 1620-L was revised to replace the previously deleted language “member’s guardian” with Health Care Decision Maker (HCDM) throughout the Policy.

AMPM EXHIBIT 1620-4 - ACUTE CARE ONLY “D” PLACEMENT GUIDELINES

AMPM Exhibit 1620-4 has received a general review and to clarify that EPD no longer has an Acute Care Only capitation rate. Additionally, minor grammatical and formatting changes were done.

POST TRIBAL CONSULTATION NOTIFICATION AND PUBLIC COMMENT CHANGES:

AMPM Policy 1620-4 was revised to replace the previously deleted language “member’s guardian” with Health Care Decision Maker (HCDM) throughout the Policy.

AMPM EXHIBIT 1620- 12 - SPOUSE ATTENDANT CARE ACKNOWLEDGEMENT OF UNDERSTANDING

AMPM Exhibit 1620-12 has received a general review including minor edits and formatting throughout the Exhibit. Additional language was added for the Electronic Visit Verification (EVV) requirements.

AMPM EXHIBIT 1620-18 - ALTCS MEMBER SERVICE OPTIONS – DECISION TREE

AMPM Exhibit 1620-18 had a general review to include minor edits and formatting throughout the Exhibit. Health Care Decision Maker (HCDM) and Designated Representative (DR) were added to the Exhibit in place of *legal guardian* to align with recommended legal terminology. Electronic Visit Verification (EVV) requirement was added to the Exhibit.

AMPM APPENDIX A – RESERVED

AMPM Appendix A is being reserved. The deliverables have been suspended. The health plans are no longer required to submit the data for review.

AHCCCS CONTRACT AND POLICY DICTIONARY

The AHCCCS Contract and Policy Dictionary has been revised to align with standard definitions. Refer to AHCCCS Guides and Manuals web page for complete list of Contract and Policy definitions.
[GUIDES AND MANUALS FOR HEALTH PLANS AND PROVIDERS \(azahcccs.gov\)](http://azahcccs.gov)