

1100 FEDERAL EMERGENCY SERVICES PROGRAM

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10/01/13, 12/06/18

I. PURPOSE

AHCCCS provides emergency health care services through the Federal Emergency Services (FES) Program. This Policy applies to the FES Program and sets forth requirements for coverage of services for FES Program Members.

II. DEFINITIONS

For purposes of this Policy, the following definitions apply:

ACUTE Symptoms that are characterized by sharpness or severity, have a sudden onset, have arisen quickly, and are short-lived.

CHRONIC A health related state that is not acute.

“EMERGENCY MEDICAL OR BEHAVIORAL HEALTH CONDITION” FOR A FEDERAL EMERGENCY SERVICE (FES) PROGRAM MEMBER A medical condition (including labor and delivery) or a behavioral health condition manifesting itself by acute symptoms of sufficient severity, including severe pain, such that the absence of immediate medical attention could reasonably be expected to result in:

1. Placing the member’s health in serious jeopardy (this includes serious harm to self for purposes of behavioral health).
2. Serious impairment to bodily functions.
3. Serious dysfunction of any bodily organ or part.
4. Serious physical harm to another person (for behavioral health condition).

FEDERAL EMERGENCY SERVICES (FES) PROGRAM MEMBER An eligible individual enrolled in the FES Program through AHCCCS

STABILIZED With respect to an emergency medical condition, means that no material deterioration of the condition is likely, within reasonable medical probability, to result from or occur during the transfer of the individual from a facility.

III. POLICY

Pursuant to A.R.S. §36-2903.03, certain non-citizens who meet all other requirements for Title XIX eligibility may be entitled to receive only emergency services. [A.R.S. § 36-2903.03; 42 U.S.C. § 1396b(v)]. Emergency services are medical or behavioral services necessary to treat an Emergency Medical or Behavioral Health Condition as defined in this Policy. Emergency services also include outpatient dialysis services for a FES Program Member with End Stage Renal Disease (ESRD) when the criteria specified in A.A.C. R9-22-217(B) and Section B of this Policy are satisfied. Transplant services are excluded from coverage under FES Program [42 U.S.C. § 1396b(v)(2)(C)].

A. FES PROGRAM EMERGENCY MEDICAL OR BEHAVIORAL HEALTH CONDITION(S)

To determine whether a member suffers from an Emergency Medical or Behavioral Health Condition, the focus shall be on the member's current condition and whether that condition satisfies the criteria of an Emergency Medical or Behavioral Health Condition at the time the service is rendered [A.A.C. R9-22-217(A) and (C)]. The member's current condition can be the initial injury that led to the admission, a condition directly resulting from that injury, or a wholly separate condition such as an Acute psychiatric episode. The type of facility where a member presents or where service is delivered is not a factor in the determination of an emergency condition. Even though an initial injury or behavioral health condition may be stabilized, it does not necessarily mean that the Emergency Medical or Behavioral Health Condition has ended.

The following applies for all emergency physical or behavioral health conditions:

1. The member's current medical or behavioral health condition shall be manifesting itself by Acute symptoms (a condition manifesting itself by only Chronic symptoms is not an Emergency Medical or Behavioral Health Condition, even though the absence of medical care might lead to one of the adverse consequences listed in #2 below).
2. The Acute symptoms shall be sufficiently severe that the absence of immediate medical or psychiatric attention could reasonably be expected to result in placing the member's health in serious jeopardy (including serious harm to self for purposes of behavioral health), serious impairment to bodily functions, serious dysfunction of any bodily organ or part, or serious physical harm to another person (for a behavioral health condition).

B. OUTPATIENT DIALYSIS SERVICES FOR END STAGE RENAL DISEASE (ESRD)

Pursuant to A.A.C. R9-22-217(B), outpatient dialysis services for a FES Program Member with ESRD are covered as an emergency service where the member's treating physician certifies for the month in which services are received that in his/her opinion the absence of receiving dialysis at least three times per week would reasonably be expected to result in any one of the following:

1. Placing the member's health in serious jeopardy.

2. Serious impairment of bodily function.
3. Serious dysfunction of a bodily organ or part.

As an initial certification that the aforementioned criteria have been met, when dialysis services for ESRD are needed for the first time, the treating physician shall complete and sign the “Initial Dialysis Case Creation” form and then submit the form to AHCCCS/DFSM. This form is provided as Attachment A.

The dialysis services will continue to be covered on a monthly basis as long as the FES Program Member remains eligible and the treating physician completes Attachment B (“Monthly Certification of Emergency Medical Condition”) and retains a completed and signed copy of Attachment B in the member’s medical record for each month that services are provided. Although the treating physician is not required to submit Attachment B to AHCCCS monthly, he/she shall retain a copy of the completed form in the member’s medical records. AHCCCS/DFSM may concurrently and/or retrospectively audit member medical records to ensure compliance with this monthly requirement.

C. SPECIAL CONSIDERATIONS

Providers are not required to obtain Prior Authorization (PA) or provide notification to AHCCCS for emergency services for an FES Program Member. A provider may, however, elect to obtain PA for outpatient ESRD dialysis as described in Section B of this policy. PA for outpatient dialysis services for a FES Program Member with ESRD is met when the treating physician has completed and signed the Monthly Certification of Emergency Medical Condition for the month in which outpatient dialysis services are received.

Services rendered through the FES Program are subject to all exclusions and limitations regarding services in A.A.C. R9-22-217.

Services rendered to a person eligible for the FES Program are subject to standards for payments in A.A.C. R9-22-702.

D. CONCURRENT AND RETROSPECTIVE REVIEW

All emergency services under the FES Program, in whatever setting, are subject to concurrent and/or retrospective review to determine if an Emergency Medical or Behavioral Health Condition existed at the time of service. If AHCCCS determines that the service(s) did not meet the criteria of an Emergency Medical or Behavioral Health Condition, then the following actions may occur:

1. Denial or recoupment of payments.
2. Feedback and education to the provider.
3. Referral to the AHCCCS Office of the Inspector General (AHCCCS OIG) for investigation, when applicable.