ARIZONA
HEALTH CARE COST
CONTAINMENT SYSTEM

High-Risk Provider Type Revalidations

July 14, 2026

Introductions

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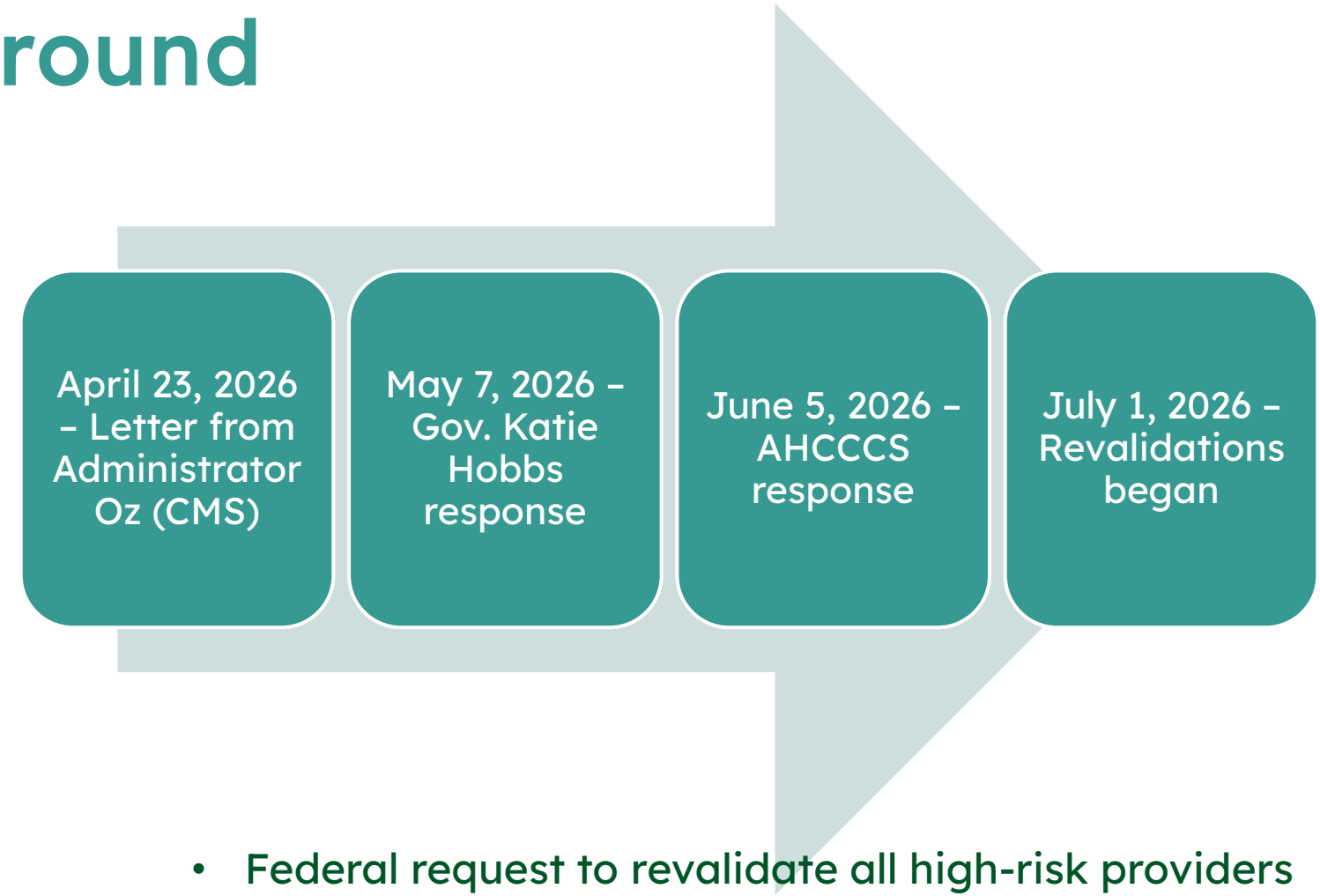
Background



- Federal request to revalidate all high-risk providers
- Ensure the accuracy of provider data
- Promote Medicaid Program Integrity

High-Risk Provider Types

Nursing Home - 22	Behavioral Outpatient Clinic - 77	Counseling Only Facility - CF
Home Health Agency - 23	Non-Medicare Certified Home Health Agency - 95	Community Health Worker Organizations - CH
Non-Emergency Transportation - 28	Community Service Agency - A3	Enhanced Shelter - ES
Durable Medical Equipment Supplier - 30	Applied Behavioral Analysis Org - AB	H2O Provider - HO
Hospice - 35	Behavioral Health Residential Facility - B8	Integrated Clinics - IC

Methodology

2,681 Total AHCCCS High-Risk Providers

484 High-Risk Providers Newly Enrolled in the last 12 months

365 High-Risk Providers revalidated in the last 12 months

304 High-Risk Providers currently in revalidation

171 High-Risk Providers located outside of Arizona

1,337 Remaining High-Risk Providers subject to revalidation

Provider Type Revalidation Volume: Month-over-Month

Provider Type	July 2026	August 2026	September 2026	October 2026	November 2026	December 2026
Behavioral Health Residential Facility	24	44	50	26	63	84
BH Outpatient Clinic	49	53	40	36	57	72
Community Health Worker Organization	0	3	7	0	1	0
Community Service Agency	0	2	1	8	7	2
Counseling Only Facility	0	0	0	0	0	4
DME Supplier	34	15	44	60	7	7
Enhanced Shelter	0	0	6	1	0	1
H2O Housing & Health Opportunities Provider	0	0	13	0	0	1
Home Health Agency	12	7	14	23	21	9
Hospice	7	14	10	15	9	10
Integrated Clinics	2	6	33	9	7	32
Non-Emergency Transportation Providers	34	60	8	2	55	5
Non-Medicare Certified Home Health Agencies	0	3	0	2	3	0
Nursing Home	40	25	5	23	5	5
Grand Total	**202**	**232**	**231**	**205**	**235**	**232**

Lower volume — Higher volume

Identifying Revalidation Dates and Resources

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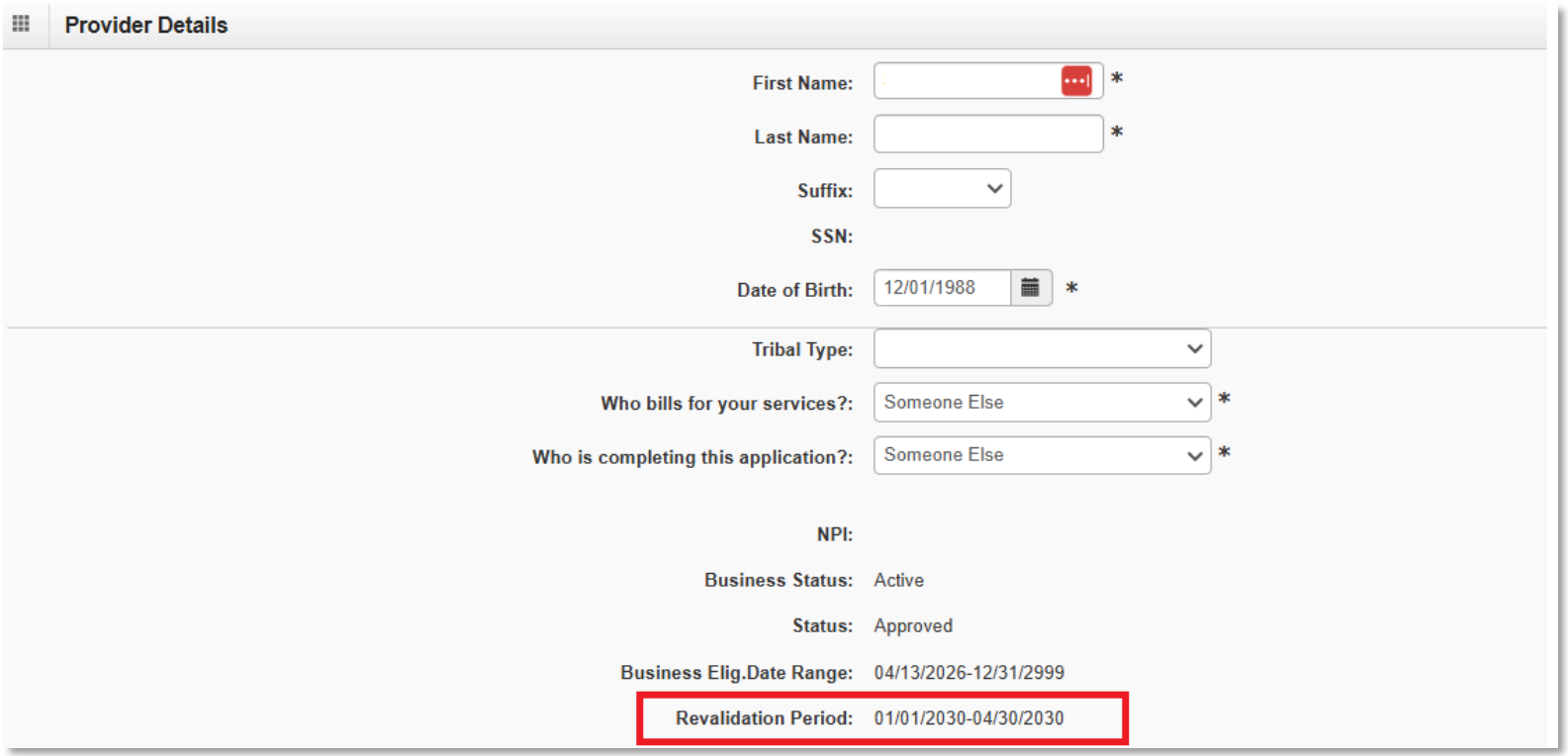
Provider Revalidations – How to identify revalidation date



https://azahcccs.gov/APEP

Provider Revalidations

https://azahcccs.gov/PlansProviders/APEP/Revalidations.html

Providers Currently Required to Complete Revalidation

The file below is a list of providers who are currently required to revalidate their enrollment and the due date for their revalidation. This provider list is updated monthly and includes information for a 12 month period. Revalidation dates may change at the agency's discretion.

- Revalidation File

How Providers Can Complete the Revalidation Process

To complete the revalidation process you must:

1. Log into APEP.
2. Under the Provider Tab, click on the "Manage Provider Information" link to find your application.
3. Respond to all steps that are marked as "Incomplete" before submitting application.
4. Upload any required documentation such as current license/certification and W-9 signed in the last 12 months.
5. Sign the electronic Provider Participation Agreement; and
6. Submit the revalidation application for State approval.

NOTE: You must complete ALL application steps through step 12 to fully submit the revalidation application. When the revalidation is submitted, you will see a red message at the top of the screen that says the application has been submitted for review.

You may also be required to submit an enrollment fee, be subject to a site visit, or perform a fingerprint criminal background check in accordance with Section 6401 of the Affordable Care Act and 42 CFR 455, Subpart E. Separate notification will be sent if your provider type requires one of these actions.

What to Expect

90-day request to complete revalidation

Provider Submits Revalidation

Site Visit

AHCCCS review/process revalidation

Best Practices to Avoid Termination

Ensure correspondence information is current in APEP

Respond to requests from AHCCCS timely

Be prepared:

Site Visits
Fingerprint Based Criminal Background Checks
W-9 signed in the last 12 months
Current copies of license

Application Fee Tips

1

Wait 24 hours after receiving the fee payment letter

2

Do not reuse login/password from other fee payment letters

3

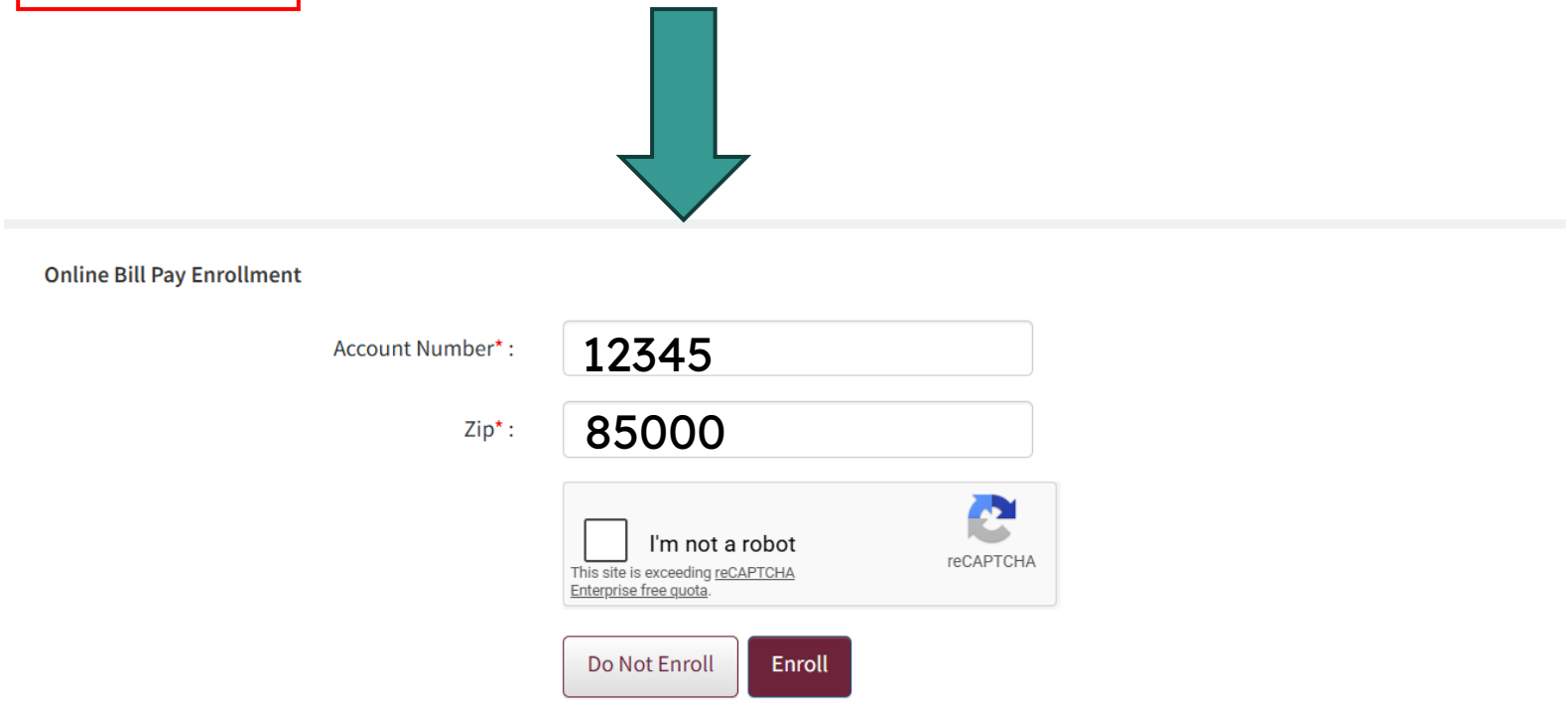
User ID in letter = Account Number in Online Bill Pay

Application Fee Tips

Dear Provider,

To complete your application or modification request, a payment must be made. To find out how much the fee is and how to pay, please visit https://www.azahcccs.gov/PlansProviders/APEP/ProviderEnrollmentFee.html.

Use the following User ID and Zip Code to log in:
User ID: 12345
Zip Code: 85000



Provider Enrollment Resources

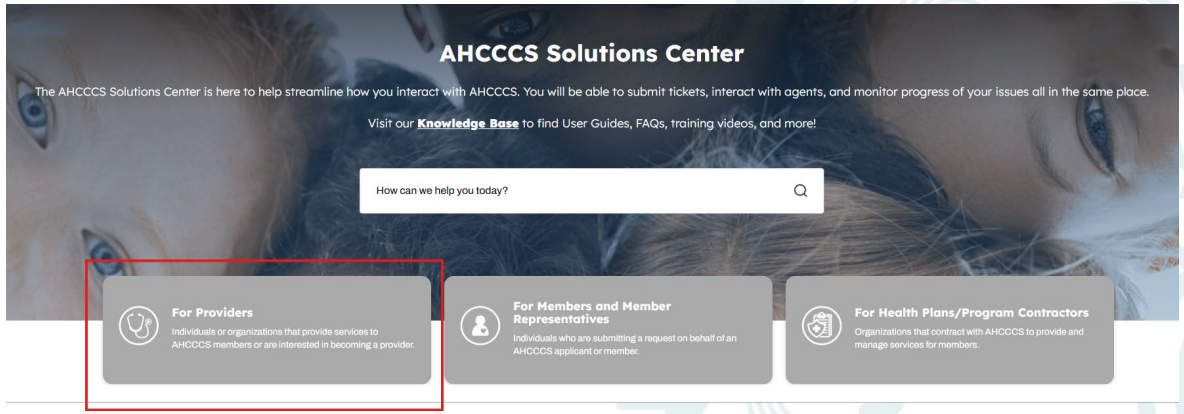
- Provider Enrollment Policy Manual
- AHCCCS Medical Policy Manual Chapter 610
- Provider Enrollment Screening Glossary
- Domain Access in APEP
- Fingerprint-Based Criminal Background Requirement
- Provider Participation Agreement – Provider
- Provider Participation Agreement – Group Biller
- www.azahcccs.gov/APEP

AHCCCS Solutions Center (ASC)

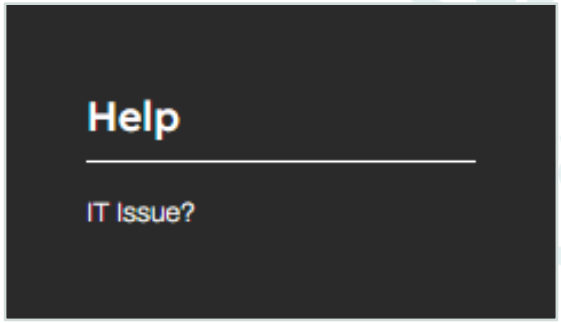
ASC User Guide

AHCCCS Solutions Center

Submit Provider Enrollment inquiries through the "For Providers" option



Use “IT Issue?” for technical issues only



Q&A Session

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Thank you!

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