AHCCCS Provider Enrollment Portal (APEP) to Launch in 2020

For the past several months, AHCCCS has been announcing the Spring 2020 launch of the new AHCCCS Provider Enrollment Portal (APEP) that will allow providers to:

- Enroll as an AHCCCS provider;
- Report changes to update their provider profile (such as phone and addresses, etc.);
- Upload and/or update licenses and certifications;
- Track submission and status of an application or update;
- And more, all online anytime of the day!

This change, from a 100% manual process to the new, automated system will streamline the provider enrollment process. Initial applications and updates to existing provider profiles will be processed more quickly and online.

In preparation for the APEP implementation, AHCCCS announces an Application Cut-Off Timeline to support the provider data conversion process. It is imperative to read all forthcoming APEP-related communication. More information about new system training will be released in the next few months.

Application Cut-Off Timeline

- All new, reactivating and changes to existing provider applications must be received by AHCCCS no later than December 12th, 2019. This will guarantee timely processing of the application or requested change through the current paper-based process.
- Provider conversion into APEP begins January 16th 2020. The new, fully operational system will be available to providers on March 2nd, 2020.
- During the conversation into APEP, AHCCCS cannot accept any new or reactivation provider applications, or applications requesting a change to an existing provider. This temporary hold on applications will last from December 12th, 2019 until March 2nd, 2020.

To access provider enrollment registration materials please visit us online.

If you have questions please contact Provider Enrollment at:
- 1-800-794-6862 (In State – Outside of Maricopa County)
- 1-800-523-0231 (Out of State)

Or Email us at PRNotice@azahcccs.gov

To provide current important implementation updates, AHCCCS will use email distribution lists and the AHCCCS website to disseminate information. Some resources include:

- The Provider Update page
- Subscribing to emails from the Office of Inspector General, Division of Fee-for-Service Management, Division of Health Care Advocacy and Advancement, Office of the Director and Division of Health Care Management. Providers can subscribe on the AHCCCS website
- Reviewing newsletters on the AHCCCS website, such as the Claims Clues Newsletters (published monthly)
AHCCCS has recently received questions regarding when a vaccination is billable to Optum via the Point of Sale (POS) System and when it is not.

**Billable to Optum through the POS System**

When an AHCCCS covered vaccine, such as a flu vaccine, is administered to an adult AHCCCS member, who is 19 years of age or older, in the pharmacy by a pharmacist in accordance with the Arizona State Board of Pharmacy regulations.

**Not Billable to Optum through the POS System**

When an AHCCCS covered vaccine, such as a flu vaccine, is administered to an AHCCCS member during an office visit. For instance, a physician or a medical assistant administers the medication. This would not be billable to Optum via the POS System.

Per the Fee-For Service and IHS/Tribal Provider Billing Manuals:

**Vaccines and Emergency Medications Administered by Pharmacists to Members 19 Years of Age and Older**

AHCCCS covers vaccines and emergency medication for adults without a prescription order when administered by a pharmacist or an intern at the pharmacy, who is currently licensed and certified by the Arizona State Board of Pharmacy consistent with the limitations of this Policy and state law A.R.S §32-1974.

When billing for a vaccine or medication administered by pharmacists or interns, the facility may not submit a claim to AHCCCS for the administration of the vaccine in addition to the pharmacy billing the PBM for the cost of the vaccine/medication.

For purposes of this section “Emergency Medication” means emergency epinephrine and diphenhydramine. “Vaccines” are limited to AHCCCS covered vaccines for adults as noted in the AHCCCS Medical Policy Manual (AMPM) Policy 310-M, Immunizations.

In addition to the requirements specified in A.R.S. § 32-1974, AHCCCS requires the following:

1. The pharmacy providing the vaccine must be an AHCCCS registered provider;
2. IHS and 638 Pharmacies must be registered with AHCCCS; and
3. The AHCCCS member receiving the vaccine must be age 19 years or older.

AHCCCS retains the discretion to determine the coverage of vaccines administered by pharmacists/interns and coverage is limited to the FFS PBM Network Pharmacies.

**IHS and 638 Pharmacies**

IHS and 638 Pharmacies may bill the outpatient AIR one time which includes the cost and the administration of the vaccine, when administered by a pharmacist or intern.

The AIR claim, which covers the administration and the cost of the vaccine, counts as the one pharmacy AIR that can be billed per member per day per facility, and applies to medications and vaccines.

IHS and 638 pharmacies may bill the outpatient all-inclusive rate when the pharmacist/intern administers an adult vaccine to a member at the pharmacy, as noted above. The claim shall only be submitted to the FFS PBM for the AIR claim’s adjudication.

i.e. A member goes to a pharmacy and has two prescriptions filled, and receives a vaccine administered by the pharmacist. The facility shall not bill for any of these services. The pharmacy may bill one AIR for the two prescriptions and the cost and administration of the vaccine.
Memo: State of Arizona House Bill 2075; Electronic Prescribing of Controlled Substances (EPCS)
Date: October 23rd, 2019

The purpose of this memo is to provide notification of the State of Arizona House Bill 2075 as it pertains to Electronic Prescribing of Controlled Substances and the attached additional information on available resources.

Beginning January 1, 2020, a Schedule II controlled substance that is an Opioid shall be dispensed only with an electronic prescription order as required by Federal Law or Regulation. The Arizona State Board of Pharmacy will not issue waivers to providers for this regulation.

This is a statutory mandate to all providers sending and pharmacies receiving Schedule II Opioid Prescriptions. Exceptions to HB2075 include federal facilities, for example, the Indian Health Service, the Department of Veterans Affairs and the Department of Defense; these facilities are not subject to this regulation.

For additional information regarding HB2075, please click the link below to the Arizona State Board of Pharmacy website to view the Frequently Asked Questions tab “E-Prescribing of Schedule II Opioids Mandate”.

pharmacy.az.gov/faq

Please contact the AHCCCS Pharmacy Department at AHCCCSSPharmacyDept@azahcccs.gov with any questions.

Arizona Controlled Substances Prescription Monitoring Program

Electronic Prescribing of Controlled Substances (EPCS) Pharmacy Requirements

Beginning January 1, 2020, a schedule II controlled substance that is an opioid may be dispensed only with an electronic prescription order as prescribed by federal law or regulation.

This is a statutory mandate to all pharmacies receiving Schedule II opioid prescriptions, with the exception of federal facilities (Indian Health Service, Department of Veterans Affairs, and Department of Defense), as they are not subject to state law.

DISPENSERS FREQUENTLY ASKED QUESTIONS

What is EPCS?
EPCS stands for Electronic Prescribing of Controlled Substances and may also be referred to as e-Prescribing of Controlled Substances.

What does EPCS-certified mean?
In 2010, the Drug Enforcement Administration (DEA) issued regulations permitting prescribers to write prescriptions for controlled substances electronically. A practitioner is able to issue electronic controlled substance prescriptions only when the electronic prescription or electronic health record (EHR) system the practitioner is using is EPCS-certified. In order to be EPCS-certified, the system must meet strict DEA requirements for credentialing, software certification and dual factor authentication.

What is the difference between e-Prescribing and EPCS?
Electronic prescribing, or “e-Prescribing,” allows
health care providers to enter non-controlled substance prescription information into a computer device and securely transmit the prescription to pharmacies using a special software program and connectivity to a transmission network. EPCS-certified systems allow health care providers to submit electronic prescriptions for schedule II-V controlled substances. EPCS-certified systems are specialized systems that must meet strict DEA requirements for credentialing, software certification, and dual factor authentication.

Is it true that all Arizona pharmacies must be able to receive controlled substance prescriptions electronically?

Beginning January 1, 2020, a schedule II controlled substance that is an opioid may be dispensed only with an electronic prescription order as prescribed by federal law or regulation. This is a statutory mandate to all pharmacies receiving Schedule II opioid prescriptions, with the exception of federal facilities (Indian Health Service, Department of Veterans Affairs, and Department of Defense), as they are not subject to state law.

Is there a waiver for pharmacies that are currently unable to accept electronically submitted Schedule II opioid prescriptions?

No, there is not a waiver available for schedule II opioid e-Prescribing. Pharmacies must have an EPCS-certified system by January 1, 2020 in order to receive electronic prescriptions for schedule II controlled substances that are opioids.

If a prescriber sends an electronic prescription for a Schedule II opioid to a pharmacy, but the pharmacy is out of stock of the medication, can the pharmacy electronically transfer the prescription to another pharmacy?

As of February 2019, pharmacies can only forward an EPCS Schedule II prescription to another store if their EPCS software has that feature. Pharmacies cannot transfer a Schedule II controlled substance prescription. If your EPCS software does not have a forwarding feature, your vendors may currently be working on DEA-approved technology to allow the forwarding of the prescription. However, this functionality will take time for vendors to develop.

Do Schedule II opioid prescriptions from out-of-state prescribers need to be electronically submitted?

Per H.B. 2075, A pharmacy may sell and dispense a schedule II controlled substance prescribed by a medical practitioner who is located in...another state if the prescription was issued to the patient according to and in compliance with the applicable laws of the state of the prescribing medical practitioner and federal law.

Can I fill a written prescription for a schedule II opioid if the provider’s electronic prescribing system or my pharmacy management system is not operational or available in a timely manner?

As per H.B. 2075, If the electronic prescribing system or a pharmacy management system is not operational or available, the pharmacist may dispense a prescription order that is written for a schedule II controlled substance that is an opioid. The pharmacist must maintain a record, for a period of time prescribed by the board, of when the electronic prescribing system or pharmacy management system is not operational or available in a timely manner.

Can outpatient pharmacies fill handwritten prescriptions from federal facilities?

Yes. As per H.B. 2075, A pharmacist may dispense a prescription order if the prescription order for a schedule II controlled substance that is an opioid is in writing and indicates that the medical practitioner who issued the prescription order provided care for the patient in a veterans administration facility, a health facility on a military base, an Indian Health Services hospital or other Indian Health Service facility, or a Tribal-owned clinic.

What are the next steps for pharmacies if compliance is not met with becoming EPCS capable?

The Board of Pharmacy will enforce provisions through the opening of and receiving of complaints.
HB2075 Reminders with Additional Resource Information

4 OF 10 PRESCRIBERS AT RISK FOR MISSING THE 2020 EPCS MANDATE

According to the latest Surescripts data, roughly 4 out of 10 prescribers in Arizona are at risk for missing the January 1, 2020 deadline to meet the new electronic prescribing of controlled substances (EPCS) state requirements mandated by HB 2075. As of August 2019, approximately 61% of prescribers in Arizona are on track – 39% are not.

For those who have yet to meet the requirements, Health Current’s 2019 EPCS Click for Control campaign is here to help.

Developed in partnership with the Arizona Health Care Cost Containment System (AHCCCS), Arizona Department of Health Services (ADHS) and the Arizona Board of Pharmacy, the 2019 EPCS Click for Control campaign offers a wealth of online resources to help meet the requirements.

In addition to the online materials, the popular 2019 EPCS Click for Control Campaign webinar series is available for two remaining dates before the 2020 deadline. Previous webinars were recorded and are available on the Health Current website for viewing. Click on the webinar titles to register:

CSPMP: Controlled Substance Prescription Monitoring Program Wednesday, October 30, 2019, 12:00 – 1:00 pm

Written & Electronically Transmitted Prescription Requirements Wednesday, November 20, 2019, 12:00 – 1:00 pm

For more information visit the 2019 EPCS Click for Control online resources. For other EPCS questions, contact Health Current at erx@healthcurrent.org or (602) 688-7200.

AHCCCS Fee For Service Drug List & T(RBHA) Drug List Effective 10/01/2019

Dear AHCCCS Providers,

The Division of Fee for Service Management has posted the AHCCCS FFS Drug List and the AHCCCS T(RBHA) Drug list to the AHCCCS Pharmacy Information web page.

The Fee For Service and T(RBHA) Drug Lists are effective October 01, 2019 and we have provided the links to the AHCCCS web pages below.

- AHCCCS_DRUG_LIST.pdf
- AHCCCS TRBHA Drug List.pdf

If you require additional assistance, information or if you have specific questions in regards to the October 01, 2019 Drug lists, you can submit your questions to the Pharmacy Department at AHCCCSSPharmacyDept@azahcccs.gov

If you have questions in regards to provider training or a specific question in regards to a AHCCCS policy, you can submit your questions to our Provider Training team at Providertrainingffs@azahcccs.gov.
APR-DRG Payment Policy Updates

The AHCCCS DRG Payment Policies document has been updated as of October 1, 2019. It can be found on the AHCCCS website, on the DRG-Based Payment webpage, and in the AHCCCS Fee-For-Service Provider Billing Manual as an Addendum to Chapter 11.

Covered Behavioral Health Services Guide – Important Update

Important Notice:
Information contained within the AHCCCS Covered Behavioral Health Services Guide (CBHSG) has been transitioned into the following areas:

- AHCCCS Medical Policy Manual (AMPM) Policy 310-B, Behavioral Health Services Benefit
  - Title XIX/XXI benefit information.
- **AMPM Policy 320-T, Non-Title XIX/XXI Behavioral Health Services**
  - Non-Title XIX/XXI service information.
- Appropriate AMPM Policies as necessary, including:
  - AMPM Policy 310-BB, Transportation; and
  - AMPM Policy 310-V, Behavioral Health Residential Facilities (BHRFs).
- The Fee-For-Service (FFS) and IHS/Tribal Provider Billing Manuals **Undergoing updates as of 10/27/2019.
  - Chapter 19, Behavioral Health Services, FFS Provider Billing Manual
  - **Behavioral Health services billing information for FFS Providers**
  - **Note**: Billing information in the FFS Provider manual is primarily directed to FFS providers; however, the general billing information not identified as specific to FFS providers may also be referred to by ACC (MCO) providers. For FFS Providers, any billing information noted as specific to ACC (MCO) only does not apply to FFS.
  - Chapter 12, Behavioral Health Services, IHS/Tribal Provider Billing Manual
  - **Behavioral Health services billing information for IHS/Tribal Providers**.

For providers serving AIHP/FFS members, the DFSM Provider Training team can be reached at Provider-TrainingFFS@azahcccs.gov.

Providers serving ACC plan members should refer to the enrolled ACC plan billing manual, and/or contact the ACC plan directly for billing related questions.

Telehealth Services - Important Update

Important Notice:
Information contained within the Telehealth Training Manual shall be transitioned into the following areas:

- The Fee-For-Service (FFS) and IHS/Tribal Provider Billing Manuals
  - Chapter 10, Individual Practitioner Services, of the Fee-for-Service Provider Billing Manual
- Chapter 8, Individual Practitioner Services, of the IHS/Tribal Provider Billing Manual

AMPM 320-I, Telehealth Services, recently finished up a public comment period. AHCCCS is reviewing the public comments and upon finalizing our review will post updates in the AMPM.
Behavioral Health Facilities Providing Personal Care Services

Effective for dates of service 10/1/2019 and on, Behavioral Health Residential Facilities (BHRFs) who are also licensed through the Arizona Department of Health Services (ADHS) to provide personal care services may begin billing for H0018 (Behavioral health; short term residential, without room and board, per diem) with the TF modifier for personal care services.

This billing combination is only to be used by BHRFs licensed with ADHS to provide personal care services. Any member receiving such services must have had an assessment by a medical provider indicating that the member’s condition requires assistance with personal care.

Please note that a BHRF that is licensed to provide personal care services should only bill H0018 with the TF modifier for members that require personal care services, as documented in their assessment and service/treatment plan.

For additional information please review AMPM Policy 320-V, Behavioral Health Residential Facilities.

Non-Emergency Medical Transportation Daily Trip Report Reminders

NEMT providers are reminded to review the NEMT Trip Report instructions available on the AHCCCS website.

- **NEMT Daily Trip Report Instructions**

  Please note that different versions of the Daily Trip Report may **not** be used or submitted. The attachment available in Exhibit 14-1 (FFS Provider Billing Manual) and 11-1 (IHS/Tribal Provider Billing Manual) is the only version that may be submitted.

- Providers are not permitted to create their own versions of the AHCCCS Daily Trip Report for submission. **Only the AHCCCS approved Daily Trip Report can be used.**

- It is available as a PDF and Excel file (to allow providers to expand the additional information area if needed).

The AHCCCS Daily Trip Report should be scanned in as an 8 ½ x 11 (Letter Size) PDF format. If you upload a daily trip report in a different size or upload a non-PDF file, it will not be processed.

The AHCCCS Daily Trip Report may be filled out on a tablet or another electronic device, as long as all federal and state requirements are taken to protect member information. If this is done it may be submitted in one of two ways:

1. Printing it out and mailing it in, or
2. Electronic submission through the provider portal as a PDF file.

AHCCCS will not accept HTML files of the AHCCCS Daily Trip Report.

AHCCCS will not accept Excel files of the AHCCCS Daily Trip Report. If a provider uses the Excel file, they **must** convert to a PDF before submission. The Excel file was made available on the AHCCCS website due to provider requests. It still will need converted to a PDF format prior to submission.

AHCCCS **will** accept PDF files of the AHCCCS Daily Trip Report.

Note: If the AHCCCS Daily Trip Report is submitted as a PDF file through the 275 Provider Portal, it is necessary that the PDF file allow AHCCCS to extract the document, otherwise AHCCCS will not be able to view the submitted PDF file.

Questions? Please outreach the provider training team at providertrainingffs@azahcccs.gov.
As of 3/1/2019, AHCCCS members under the Early Periodic Screening Diagnostic and Treatment (EPSDT) program may be treated by Licensed Naturopathic Physicians. This AHCCCS provider type is active and is designated as 17-Naturopath in the AHCCCS Provider Enrollment system.

Naturopathic physicians blend natural medicine with conventional diagnosis and treatment. They treat the cause of illness, work to prevent disease whenever possible and teach patients how to live healthy lives using tools including nutrition, lifestyle medicine, physical medicine and herbal therapies.

In order to submit claims for AHCCCS Fee for Service Programs, an active AHCCCS provider registration is required. In order to submit claims for AHCCCS managed care organizations (MCOs), naturopathic physicians will need to be credentialed and contracted with the MCO(s) in addition to having an active AHCCCS provider registration.

Naturopathic physicians will be paid at 100% of the physician fee schedule rate. AHCCCS will pay retroactive claims and encounters for registered, eligible providers who provide medically necessary EPSDT services subject to timeliness rules.

Note: Naturopathic physician services are available to members of the AHCCCS Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Program. EPSDT provides comprehensive treatment and preventive health care services for Title XIX members under the age of 21. For additional information about the EPSDT program refer to AMPM 430, EPSDT Services.