



# REINSURANCE **HOT NEWS**

June 7, 2021

## New Skilled Nursing Facility- Habilitation-Residential Care Rate Form

Posted on AHCCCS Reinsurance Website

Please use the new SNF-Habilitation-Residential Care Rate Form when submitting new rates to the Reinsurance Unit. The new form also has a tab for ALTCS SNF Rates for Contractors who have a need. Here is the address to the web page:

<https://www.azahcccs.gov/PlansProviders/HealthPlans/Reinsurance/>

Please complete the Rate Form by entering the next rate change right below the previous.

Here is an example:

AHCCCS Arizona Health Care Cost Containment System		Contractor Name:									Contractor ID:
SNF		Date Submitted:									
Facility Name	Legal Name	Group Name	AHCCCS ID #	Rates for Dates of Service	Revenue Code 0190	Revenue Code 0191	Revenue Code 0192	Revenue Code 0193	Revenue Code 0194	Behavioral Health Revenue Code 0199	
Provider 1	Provider 1	Group 1	123456	10/1/2020 - 12/31/2020	\$100.00	\$200.00	\$300.00	\$400.00	\$500.00	\$ 600.00	
Provider 2	Provider 2	Group 2	789101	10/1/2020 - 12/31/2020	\$100.00	\$200.00	\$300.00	\$400.00	\$500.00	\$ 600.00	
Provider 3	Provider 3	Group 3	654321	10/1/2020 - 12/31/2020	\$100.00	\$200.00	\$300.00	\$400.00	\$500.00	\$ 600.00	
Provider 1	Provider 1	Group 1	123456	01/01/2021-06/30/2021	\$200.00	\$300.00	\$400.00	\$500.00	\$600.00	\$ 700.00	
Provider 2	Provider 2	Group 2	789101	01/01/2021-06/30/2021	\$200.00	\$300.00	\$400.00	\$500.00	\$600.00	\$ 700.00	
Provider 3	Provider 3	Group 3	654321	01/01/2021-06/30/2021	\$200.00	\$300.00	\$400.00	\$500.00	\$600.00	\$ 700.00	

The purpose for this change is so AHCCCS Reinsurance can easily locate your rates when auditing your cases.

