I. PURPOSE

This Policy applies to AHCCCS Complete Care (ACC), ALTCS/EPD, DCS/ CMDP (CMDP), DES/DDD (DDD), and RBHA Contractors. This Policy establishes requirements for Contractors and their subcontractors regarding the development, approval and distribution of member Identification Cards (ID Cards) for AHCCCS members.

II. DEFINITIONS

834 ENROLLMENT TRANSACTION FILE

A nightly transaction file provided by AHCCCS to its Contractors. The file identifies newly-enrolled members and enrollment changes for existing members.

ADMINISTRATIVE SERVICES SUBCONTRACTS

An agreement that delegates any of the requirements of the Contract with AHCCCS, including, but not limited to the following:
1. Claims processing, including pharmacy claims,
2. Credentialing, including those for only primary source verification (i.e. Credential Verification Organization),
3. Management Service Agreements,
4. Service Level Agreements with any Division or Subsidiary of a corporate parent owner,
5. DDD acute care subcontractors.

BEHAVIORAL HEALTH ENTITY

The entity, which may be a Contractor or TRBHA, with which the member is enrolled/assigned for the provision of and/or coordination of behavioral health services. Behavioral Health Entities are one of the following:
- Regional Behavioral Health Authority (RBHA)
- Tribal Regional Behavioral Health Authority (TRBHA)

BUSINESS DAY

For the purposes of this Policy and for those Responsible Contractors issuing ID Cards as a result of an 834 Transaction file, a business day is considered to extend from 7:00 am in the morning to 7:00 am the following morning. If the next day is a weekend or a holiday, then the ending timeframe is extended to 7:00 am in the morning of the day following the weekend or holiday.
For purposes of this Policy, a cardholder is the document in which the ID Card is attached to or the sleeve in which the ID card is provided to the member.

An area designated by AHCCCS within which a Contractor of record provides directly, or through subcontract, covered health care service to a member enrolled with that Contractor of record, as defined in 9 A.A.C. 22, Article 1.

A Contractor-specific identification card that meets the formatting requirements outlined in this Policy and issued by the Responsible Contractor to each member. The ID Card is used by the member when presenting for Medicaid services.

A Notice available on the AHCCCS website that describes:
1. The uses and disclosures of Protected Health Information (PHI),
2. Patient rights concerning PHI, and
3. The AHCCCS legal duties pertaining to PHI. The Health Insurance Portability and Accountability Act (HIPAA), requires covered entities, such as AHCCCS and its Contractors to provide this Notice upon a member's enrollment in the plan, within 60 days of a material change to the Notice, and upon request by any person. In addition, every three years a health plan also shall notify members who are covered by the plan that the Notice of Privacy Practices is available, including how to obtain the Notice.

The Contractor with which the member is enrolled for their physical health services. Where there is more than one AHCCCS Contractor providing services to a member, the Responsible Contractor is the AHCCCS Contractor or subcontractor responsible for providing for a member’s physical health care.

III. Policy

A. General

The Responsible Contractor shall produce and distribute ID Cards to all members assigned to the Contractor. The Responsible Contractor shall produce and distribute ID Cards to newly-enrolled members, and shall have a process for producing and distributing replacement ID Cards to all of the Contractors’ enrolled members. The ID Cards shall comply with the formatting, timeliness and prior approval guidelines outlined in this Policy and in Attachment A of this Policy.
B. RESPONSIBILITY FOR PRODUCING MEMBER ID CARDS

When a member is served by more than one AHCCCS Contractor, the Responsible Contractor shall be the Contractor responsible for providing the member’s physical health services.

Responsible Contractors include:
1. AHCCCS Complete Care,
2. ALTCS/EPD,
3. CMDP,
4. RBHAs, For members diagnosed with Serious Mental Illness (SMI),
5. DDD acute care subcontractors: DDD delegates responsibility for acute care services and the responsibility of producing ID Cards through subcontracts with its Subcontractors, and
6. DDD for American Indian members who are not enrolled with a DDD acute care subcontract

Attachment A of this Policy consists of a table identifying the responsibilities and formatting requirements for AHCCCS Contractors and their subcontractors.

C. PROGRAM REQUIREMENTS

Responsible Contractors shall have in place processes to ensure all members receive appropriate ID Cards in a timely manner. Refer to Attachment A to identify which of the following minimum requirements apply to a Responsible Contractor:

1. Members requiring ID Card shall be identified as a result of the 834 Transaction File and the ID Cards shall be produced and mailed as follows:
   a. The Responsible Contractor shall mail ID Cards to new members within 12 Business Days from the Business Day following AHCCCS providing the 834 Transaction File to the Contractor.
   b. The Responsible Contractor shall mail ID cards for member replacement requests within five Business Days of the request.

2. AHCCCS Contractors shall ensure the timeliness standards are met. The Contractors shall monitor the timeliness standards in this Policy for the ID Cards it issues directly, and any issued by its subcontractors.

3. If the Responsible Contractor replaces all ID Cards with a new version, each member shall receive their new ID Card at least two calendar weeks prior to the effective date of the card.

4. When a Contractor initiates services in a new GSA, or for new Contractors initiating services in the State, AHCCCS’ contract transition process will determine the timelines for issuing ID Cards.
5. A Responsible Contractor, serving members dually-enrolled in Medicare and Medicaid, may elect to issue a combined Medicare/AHCCCS ID Card. The format for the combined cards shall meet the Centers for Medicare and Medicaid Services (CMS) Medicare Advantage Program requirements for ID Cards and shall be approved by AHCCCS. To obtain AHCCCS approval, the Contractor shall meet the minimum formatting requirements identified in Attachment A as applying to ID Cards for members dually-enrolled. For the requirement of an ID Number, the Contractor may adopt additional formatting features included in this Policy or prescribed by CMS so long as the formatting features do not conflict with this Policy’s minimum requirements.

D. FORMAT OF ID CARDS

ID Cards shall meet the format standards outlined in this Policy. Not all formatting standards apply to every Responsible Contractor, see Attachment A. The following formatting standards may apply:

1. The front of the ID Card shall contain the approved color or black and white version of the AHCCCS logo. The logo shall be no smaller than 1” long by .333” inches wide. If a larger version of the logo is used, the logo shall maintain a 3:1 length to height ratio. The approved logo is available from AHCCCS.

2. The Responsible Contractor shall not edit or alter the approved logo, except as noted above.

3. The front of the ID Card shall include the following text in the Arial font no smaller than 11 points:

   Arizona Health Care Cost Containment System

   The inclusion of “Arizona Health Care Cost Containment System” within the approved AHCCCS logo does not fulfill this requirement.

4. The front of the ID Card shall identify the member’s name in the Arial font no smaller than 8 points.

5. The front of the ID Card shall include the member’s AHCCCS ID number in Arial font no smaller than 8 points. For ID Cards issued to members enrolled with CMDP, the card may use an identification number adopted by CMDP.

6. The front of the ID Card shall include the Responsible Contractor’s name in Arial font no smaller than 8 points.

7. The front of the ID Card shall include the Responsible Contractor’s telephone number in Arial font no smaller than 8 points.
8. The ID Card and/or Card Holder shall include the TTY/TDY telephone numbers for members who are Deaf or Hard of Hearing, in Arial font no smaller than 8 points.

9. The front of the ID Card shall include a contact telephone number for accessing services from the Behavioral Health Entity in Arial font no smaller than 8 points. The ID Card shall clearly identify this number as the contact for behavioral health services. If the Responsible Contractor is also the Behavioral Health Entity for the member and services are accessed through one number, a separate behavioral health services phone number is not required.

10. The front or back of the ID Card shall include the nurse triage telephone number in Arial font no small than 8 points.

11. The back of the ID Card or the Card Holder shall include the following text in the Arial font no smaller than 7 points:

   Carry this card with you at all times. Present it when you get service. You may be asked for a picture ID. Using the card inappropriately is a violation of law. This card is not a guarantee for services. To verify benefits visit <insert appropriate website address>.

12. For all Contractors except CMDP, the back of the ID Card, or the Card Holder or an insert included in the card’s mailing to the member if a Card Holder is not used, shall contain the following text font no smaller than Arial 7 points:

   To help protect your identity and prevent fraud, AHCCCS is adding pictures to its online verification tool that providers use to verify your coverage. If you have an Arizona driver’s license or state issued ID, AHCCCS will get your picture from the Arizona Department of Transportation Motor Vehicle Division (MVD). When providers pull up the AHCCCS eligibility verification screen, they will see your picture (if available) with your coverage details.

13. The ID Card or Card Holder may include additional information identified as appropriate, subject to the approval requirements of this Policy. Possible items could include plan logos, contact information for contracted hospitals, or after-hours clinics.

14. Any new ID card mailing shall include the most recent version of the AHCCCS NPP.

E. APPROVAL OF MEMBER ID CARDS AND OTHER COMPLIANCE REQUIREMENTS

An ID Card, the Card Holder, any letters or information mailed to the member with the card, and any changes to these items shall be submitted to, and prior approval obtained from, the appropriate party as outlined in the program requirements section of Attachment A.
1. The Card Holder and any letters or information mailed to the member with the ID Card shall comply with requirements outlined in ACOM Policy 404.
2. If the Responsible Contractor issues more than one version of an ID Card to its members, an example of each version shall be submitted for approval.

For those ID Cards requiring AHCCCS approval, the documents shall be submitted to the designated AHCCCS Operations and Compliance Officer as specified in Contract.

DDD shall approve ID Cards and other member information for their subcontractors who are Responsible Contractors.

Any third party subcontracted to produce or distribute ID Cards qualifies as an Administrative Services Subcontractor. AHCCCS Contractors shall obtain approval prior to implementation of the Administrative Services Subcontract, as specified in Contract and outlined in ACOM Policy 438.