DATE: April 29, 2013

TO: Holders of AHCCCS Contractor Operations Manual

FROM: Julie Ambur, Administrative Services Officer, Contracts & Policy Division of Health Care Management, AHCCCS

SUBJECT: AHCCCS Contractor Operations Manual (ACOM) - April 2013 Update

This memo describes revisions and/or additions to the ACOM for the month of April:

**Published Policy Revisions**

- **Chapter 200, Policy 205 – Ground Ambulance Transportation Reimbursement Guidelines For Non-Contracted Providers**

  The Ground Emergency Ambulance Transportation section of this policy has been updated to reflect current reimbursement practices. The Policy now states: *Ambulance providers that have fees established by the Arizona Department of Health Services (ADHS) are reimbursed by AHCCCS Contractors a percentage proscribed by law of the ambulance provider’s ADHS-approved fees for covered services. For ambulance providers whose fees are not established by ADHS, the AHCCCS Capped Fee for Service (FFS) Schedule will be used.* Additional revisions were for general formatting and not substantive.

- **Chapter 400, Policy 415 - Provider Network Development and Management Plan; Periodic Network Reporting Requirements**

  This policy has been updated to include DDD and Direct Care Worker-specific requirements. The deliverables: *HCBS Home Network Roster and Therapeutic and HCBS Services Wait Lists* are now included in this policy. The policy further clarifies that the deliverables, *Provider Terminations Due to Rates and Providers that Diminish their Scope of Service and/or Close their Panel*, are to be submitted together in the *Provider/Network Changes Due to Rates Report*.  

  Note: The Policy name has changed from *Provider Network Development and Management Plan to Provider Network Development and Management Plan; Periodic Network Reporting Requirements.* Attachment F, Ga and Gb are available in excel format on the ACOM web page.

- **Chapter 400, Policy 419 – ALTCS Network Standards**

  This Policy has been revised to include the Provider Affiliation Transaction (PAT) file submission requirement and to update the Minimum Network Standards. The General Requirements section of the policy specifies, *Conformance with these standards will be measured using data from the PAT data file submission.* Additionally, *DD Group Home* has been removed from the HCBS Community Minimum Network Standards and references to *Letters of Intent (LOI)* have been omitted. The Long Term Care-Nursing Facility standard for Nogales, GSA 50-Santa Cruz County, has also been updated to: *Within one hour drive of Nogales.* Additional revisions were for general formatting and not substantive.

*Policy updates are continued on the following page.*
• **Chapter 400, Policy 420 – ALTCS Network Summary**

  This policy has been removed and all applicable language has been incorporated into ACOM Policy 415 - *Provider Network Development and Management Plan; Periodic Network Reporting Requirements* and ACOM Policy 419 – *ALTCS Network Standards*.

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**Approved Policies Not Yet Effective**

Please access the following link to view these policies: [Approved Policies Not Yet Effective](#)

• **Chapter 400, Policy 415 - Provider Network Development and Management Plan; Periodic Network Reporting Requirements**

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