DATE: March 31, 2016
TO: Holders of the AHCCCS Contractor Operations Manual and AHCCCS Operational Guidelines
FROM: Sandi Borys, Contracts & Policy Specialist
Division of Health Care Management, AHCCCS
SUBJECT: AHCCCS Contractor Operations Manual (ACOM) and AHCCCS Operations Reporting Guidelines – April 2016 Update

This memo describes revisions and/or additions to the ACOM and AHCCCS operations reporting guidelines including the Claims Dashboard Reporting Guide, Grievance System Reporting Guide, and Provider Affiliation Transmission (PAT) User Manual.

Please direct questions regarding policy updates to Sandi Borys at 602-417-4055 or by e-mail at: sandi.borys@azahcccs.gov.

Please Note: On February 1, 2016 AHCCCS launched a new website. Any links that you may have had saved or are using in any documentation sent out to members will need to be updated to include the new web location.

UPDATES AND REVISIONS TO THE AHCCCS CONTRACTOR OPERATIONS MANUAL (ACOM)

To view the policies and attachments, please access the following link:

AHCCCS CONTRACTOR OPERATIONS MANUAL (ACOM)

None at this time.

APPROVED NOT YET EFFECTIVE

To view the policies that are approved but not yet effective, please access the following link:

ACOM Approved Policies Not Yet Effective

Please Note: Arizona Law 2015, Chapter 19 Section 9 (SB 1480) enacts that from and after June 30, 2016 the provisions of behavioral health services under Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS) is transferred to and shall be administered by AHCCCS.

CHAPTER 100, POLICY 104, BUSINESS CONTINUITY AND RECOVERY PLAN

Policy 104, Business Continuity and Recovery Plan has been revised to change the applicability from ADHS/DBHS to the Regional Behavioral Health Authorities (RBHAs). Additional changes were made to provide clarity and consistency.

° ATTACHMENT A, BUSINESS CONTINUITY AND RECOVERY PLAN CHECKLIST
No changes.
CHAPTER 100, POLICY 107, MEDICARE DUAL SPECIAL NEEDS PLANS – AHCCCS MEMBERS

Policy 107, Medicare Dual Special Needs Plans – AHCCCS Members has been revised to change the applicability from ADHS/DBHS to the RBHAs. The distinction of an Integrated RBHA has been eliminated due to the integration of all RBHAs making this distinction no longer necessary. In addition, changes were made to provide clarity and consistency.

CHAPTER 100, POLICY 108, AHCCCS SECURITY RULE COMPLIANCE

Policy 108, AHCCCS Security Rule Compliance has been revised to change the applicability from ADHS/DBHS to the RBHAs. As well as, adding clarification language throughout Policy. In addition definitions are now aligned with what is found in the managed care Contracts.

- ATTACHMENT A, AHCCCS SECURITY RULE COMPLIANCE SUMMARY CHECKLIST
  No changes.

CHAPTER 400, POLICY 408, SANCTIONS

Policy 408, Sanctions has been revised to change the applicability from ADHS/DBHS to the Regional Behavioral Health Authorities (RBHAs).

CHAPTER 400, POLICY 426, CHILDREN’S REHABILITATIVE SERVICES REFERRALS, ENROLLMENT AND COVERAGE

The Policy has been revised to change the applicability from ADHS/DBHS to the RBHAs. The title of Policy 426, Children’s Rehabilitative Services Referrals, Enrollment and Coverage has been changed removing Guidelines from the original title for clarification of what is contained within the Policy. Redirection was also added to point to the AHCCCS Website for appropriate form and instructions of use. Further clarification was given throughout the policy in addition to changing applicability from ADHS/DBHS to the RBHAs.

CHAPTER 400, POLICY 431, COPAYMENT

Policy 431, Copayment has been revised to change the applicability from ADHS/DBHS to the RBHAs. Various information including both Non-Mandatory copayments and requirements for non-title XIX and XXI members with Severe Mental Illness that was found in ADHS/DBHS Policy 601, Copayments (includes Non-Title XIX Coverage) has been added. Additional updates have been made to align with Arizona Administrative Code R9-22-711 within the policy. Changes were also made throughout the policy to align use of common terminology for mandatory and non-mandatory copayments.

- ATTACHMENT A, AHCCCS NOTIFICATION TO SET MEMBERS COPAY FLAG TO EXEMPT
  Revised to require a discard date and clarification to ensure Contractors are aware of responsibilities to close exemption for each episode.
CHAPTER 400, POLICY 433, MEMBER IDENTIFICATION CARDS

Policy 433, Member Identification Cards has been revised to change the applicability from ADHS/DBHS to the RBHAs. Additional changes include adding Teletypewriter (TTY) Arizona Relay System telephone number (711) as a requirement to either the front or back of all ID Cards or on the Card Holder. There were no operational changes made to this Policy however, changes were made to provide clarity and consistency throughout the ACOM.

- **ATTACHMENT A, TABLE OF REQUIREMENTS**

  Attachment A was modified to reflect that the ID card format for Behavioral Health which were previously reviewed and approved by ADHS are now to be reviewed by the RBHAs. In addition, a line was added to include Teletypewriter (TTY) Arizona Relay System telephone number (711).

CHAPTER 400, POLICY 434, COORDINATION OF BENEFITS AND THIRD PARTY LIABILITY

Policy 434, has been revised to change the applicability from ADHS/DBHS to the RBHAs. ADHS/DBHS Policy 701, Third Party Liability and Coordination of Benefits (Coordination with Non-Title XIX Funds and appropriate provisions have been revised for applicability to all contractors and has been merged within the Policy. Language was also added for clarification that Contractors cannot tag claims for recovery, if the recovery process has not begun prior to the end of their two-year recovery period, and that tagged claims will be submitted to AHCCCS monthly in a match-off file.

- **ATTACHMENT A, SETTLEMENT NOTIFICATION FORM**

  To align Attachment A, Settlement Notification Form with the Contract a change from the term Recipient to Member was made throughout the attachment.

- **ATTACHMENT B, TRAUMA CODE ICD10 LIST**

  No changes.

CHAPTER 400, POLICY 435, TELEPHONE PERFORMANCE STANDARDS AND REPORTING

Policy 435, Telephone Performance Standards and Reporting has been revised to change the applicability from ADHS/DBHS to the RBHAs. The Title was changed from Telephone Performance Standards Measurement and Reporting to remove Measurement from the title. Telephone reporting measures were aligned with quarterly reporting measures as identified in claims dashboard reporting. Minor changes to wording for clarification were also made.

- **ATTACHMENT A, TELEPHONE PERFORMANCE MEASURES TEMPLATE – CENTRALIZED TELEPHONE LINE DOWN**

  No changes.

- **ATTACHMENT B, TELEPHONE PERFORMANCE STANDARDS MEASUREMENT AND REPORTING**

  No changes.
CHAPTER 400, POLICY 438, ANNUAL SUBCONTRACTOR ASSIGNMENT AND EVALUATION

Policy 438, Annual Subcontractor Assignment and Evaluation has been revised to change the applicability from ADHS/DBHS to the RBHAs. RBHA Contractors will now be held to the same requirements as other Contractors.

- **ATTACHMENT A, ADMINISTRATIVE SERVICES SUBCONTRACT CHECKLIST**
  Added Administrative Services Subcontract throughout Attachment A to provide clarity.
  Added an additional requirement that the Administrative Services Subcontractors develop and maintain a Business Continuity and Recovery Plan.

- **ATTACHMENT B, ADMINISTRATIVE SERVICES SUBCONTRACTOR EVALUATION REPORT TEMPLATE**
  No changes.

CHAPTER 400, POLICY 440, MANAGED CARE EXPIRATION OR TERMINATION OF CONTRACT

Policy 440, Managed Care Expiration or Termination of Contract has been revised to change the applicability from ADHS/DBHS to the RBHAs. In addition, received minor changes for clarity.

UPDATES AND REVISIONS TO THE AHCCCS OPERATIONAL REPORTING GUIDELINES

INCLUDING: CLAIMS DASHBOARD REPORTING GUIDE, GRIEVANCE SYSTEM REPORTING GUIDE, PROVIDER AFFILIATION TRANSMISSION (PAT) USER MANUAL

To view the current Reporting Guides, please access the following link:

AHCCCS OPERATIONS REPORTING GUIDELINES

**CLAIMS DASHBOARD REPORTING GUIDE**
No revisions at this time.

**GRIEVANCE SYSTEM REPORTING GUIDE**
No revisions at this time.

**PROVIDER AFFILIATION TRANSMISSION (PAT) USER MANUAL**
No revisions at this time.