DATE: August 01, 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 – August 1 of 2

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)

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 400, POLICY 405, CULTURAL COMPETENCIES

Policy 405, Cultural Competencies 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. The term fiscal agent has been removed from the policy. In addition, changes were made to provide clarity and consistency.

Appropriate provisions that were found within DBHS Policy 407, Cultural Competence, have also been merged into this Policy. In addition, as a result of Public Comment definitions have been clarified. Also, Language Services Report requirement has been removed from the deliverables and the substance of the requirement has been incorporated into the section by use of linguistic need. The RBHA Contracts will also be adjusted to reflect this change.
ATTACHMENT A, CULTURAL COMPETENCY PLAN ASSESSMENT REPORTING CHECKLIST.

The Checklist formally called; Cultural Competency Evaluation and Plan Checklist has been changed to Cultural Competency Plan Assessment Reporting Checklist to comport with the changes that were made within the Policy surrounding the annual submission is comprised of a plan assessment report.

Additional requirements surrounding training, outlining the Contractor’s ability to provide, upon request by a member, easy-to-understand print and member information materials, considerations includes members with LEP or limited reading skills, those with diverse cultural and ethnic backgrounds, and those with visual or auditory limitations, along with submission of language services report. In addition, the entire checklist was revised to provide clarity.

CHAPTER 400, POLICY 437, FINANCIAL RESPONSIBILITY FOR SERVICES AFTER THE COMPLETION OF COURT-ORDERED EVALUATION

Policy 437, Financial Responsibility for Services After the Completion of Court-Ordered Evaluation has been revised to change the applicability from ADHS/DBHS to the RBHAs. Appropriate provisions that were found within DBHS Policy 109, Pre-Petition Screening, Court Ordered Evaluation and Treatment have also been merged into this Policy.

In accordance with A.R.S. §36-545.06, the cost of pre-petition screening and court-ordered evaluation is a county responsibility unless the county has an agreement with AHCCCS under A.R.S. § 36-545.07 to provide those services for the county. Absent of such an agreement between the State and the county, the RBHA is responsible for medically necessary, covered behavioral health services other than services associated with the pre-petition screening and court-ordered evaluation. In addition, changes were made to provide clarity and consistency.

NEWLY ADDED TO THE 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

None at this time.
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

The AHCCCS Claims Dashboard Reporting Guide has been updated to now include a purpose section
to match current guide formatting and to include a section on who the guide applies to and how/what
report. Additional, revisions were done to align with contract requirements and to provide clarity

GRIEVANCE AND APPEAL SYSTEM REPORTING GUIDE

The AHCCCS Grievance and Appeal System Reporting Guide has received a name change from The
AHCCCS Grievance System Reporting Guide as a direct result of the new Managed Care Regulations.
Specific requirements of the RBHAs surrounding Non-Titled Members have been removed and will
no longer be a requirement.

PROVIDER AFFILIATION TRANSMISSION (PAT) USER MANUAL

No revisions at this time.