

**DATE:** April 05, 2017

**TO:** Holders of the AHCCCS Contractor Operations Manual and AHCCCS Operational Guidelines

**FROM:** DHCM Contracts and Policy

**SUBJECT:** AHCCCS Contractor Operations Manual (ACOM) and AHCCCS Operations Reporting Guidelines

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 the Contracts and Policy Unit at 602-417-4295 or 602-417-4055 or email at [DHCMContractsandPolicy@azahcccs.gov](mailto:DHCMContractsandPolicy@azahcccs.gov).

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**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 \(ACOM\)](#)

**CHAPTER 400, POLICY 403, ENROLLMENT CHOICE IN A CHOICE COUNTY AND CHANGE OF CONTRACTOR:**  
**ARIZONA LONG TERM CARE SYSTEM**

Policy 403, title was changed from Enrollment Choice in a County and Change of Contractor Policy: Arizona Long Term Care System (ALTCS) and Elderly/Physically Disabled (EPD) Contractors to Enrollment Choice in a Choice County and Change of Contractor: Arizona Long Term Care System to indicate it is for the ALTCS Contractors and clarifies that it applies also to EPC Contractors as well. In addition, the Policy was revised to align with requirements set forth in the Contract. Language was removed surrounding re-enrollment after disenrollment found to be duplicative of language found in ACOM Policy 402. Additionally, language regarding enrollment procedures was removed as being duplicative of language found in the Eligibility Manual. Information was added to address the grievance and appeal process.

**CHAPTER 400, POLICY 404, MEMBER INFORMATION**

A correction was made to Policy 404, Member Information Section C, Incentives to comply with Center for Medicare and Medicaid (CMS) and 42 CFR 422.2268. *The Contractor may offer incentive items (e.g. gift cards, discounts for merchandise or services, manufacturer or store coupons for savings on products) to member to participate in health-related promotions, but the total value of the items at each event or program may not exceed \$50.00 per person ~~household~~.*

**CHAPTER 400, POLICY 442, MEMBER WITH A SERIOUS MENTAL ILLNESS REQUEST TO OPT OUT FROM A REGIONAL BEHAVIORAL HEALTH AUTHORITY TO AN ACUTE CARE CONTRACTOR**

Oversite for approvals/denials of Opt Out language was revised in Policy 442, Member with a Serious Mental Illness Request to Opt Out From a Regional Behavioral Health Authority to an Acute Care Contractor. Additional responsibilities are being placed on the RBHA's for managing Opt Out Denial/Approval Decisions and any Appeals/Hearing which may result from denials. Historically these changes were handled by Division of Behavioral Health Services (DBHS) prior to Arizona Law 2015, Chapter 19, Section 9 (SB 1480) that enacted from and after June 30, 2016, the provision of behavioral health services under DBHS in the Department of Health Services is transferred to and shall be administered by the AHCCCS.

**APPROVED NOT YET EFFECTIVE**

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

**[ACOM APPROVED NOT YET EFFECTIVE](#)**

The following Policies are posted for Contactor reference however, will not be in effect until October 01, 2017.

**CHAPTER 100, POLICY 104, CONTINUITY OF OPERATIONS AND RECOVERY PLAN**

The title for Policy 104 Business Continuity and Recovery Plan was changed to Continuity of Operations and Recovery Plan. Additional requirements were added to ensure the restoration of business operations following unexpected events, or the threat of such event, which impact their ability to adequately serve members. Contractors shall also ensure that all staff are trained and familiar with the Plan at least annually, and understand their respective roles.

- **ATTACHMENT A, BUSINESS CONTINUITY OF OPERATIONS AND RECOVERY PLAN CHECKLIST**

Attachment A, title has been revised to include Business Continuity of Operations and Recovery Plan Checklist.

**CHAPTER 400, POLICY 436, NETWORK STANDARDS**

Policy 436, Network Standards was revised to remove the references to Geographical Service Areas (GSA) due to AHCCCS no longer assigning network standards by GSA but rather by zip codes.

- **ATTACHMENT A, MINIMUM NETWORK REQUIREMENTS VERIFICATION TEMPLATE**

None at this time.

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**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 AND APPEAL SYSTEM REPORTING GUIDE**

No revisions at this time.

**PROVIDER AFFILIATION TRANSMISSION (PAT) USER MANUAL**

No revisions at this time.