

DATE: September 06, 2018
To: Holders of the AHCCCS Contractor Operations Manual
FROM: DHCM Contracts and Policy
SUBJECT: AHCCCS Contractor Operations Manual (ACOM)

This memo describes revisions and/or additions to the ACOM

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.

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 \(ACOM\)](#)

During the month of September AHCCCS will be transitioning the Policies from the *Approved Not Yet Effective* section of the ACOM webpage to the ACOM final publishing section. Some Policies may have additional changes since the date they were first posted to the *Approved Not Yet Effective* section. In the event additional changes were made, those revisions are indicated below. Policies that had no additional changes are then listed after. The transitioned policies have a 10/01/18 effective date.

POLICY 406, MEMBER HANDBOOK AND PROVIDER DIRECTORY

- Updated section III., A., 1., b., to add language, “including definitions as required by Centers for Medicare and Medicaid Services (CMS) specified in Attachment B”.
- **ATTACHMENT A, MEMBER HANDBOOK CHECKLIST**
 - Attachment A was revised for minor formatting and the verbatim statement throughout was updated throughout to, “To be included verbatim in the handbook”: for consistency.
- **ATTACHMENT B, CMS REQUIRED DEFINITIONS**
 - No changes.

POLICY 436, NETWORK STANDARDS

- No changes.
- **ATTACHMENT A, MINIMUM NETWORK REQUIREMENTS VERIFICATION TEMPLATE**
 - Attachment A was revised to update ‘Pima/Maricopa’ and ‘all other counties’ standards to match Policy language.

POLICY 402, MEMBER TRANSITION FOR ANNUAL ENROLLMENT CHOICE AND ELIGIBILITY CHANGES

POLICY 404, CONTRACTOR WEBSITE AND MEMBER INFORMATION

- **ATTACHMENT A, ORGANIZATIONS RECOGNIZED BY AHCCCS**
- **ATTACHMENT B, CONTRACTOR WEBSITE CERTIFICATION CHECKLIST AND ATTESTATION**
- **ATTACHMENT C, MEMBER INFORMATION ATTESTATION STATEMENT**

POLICY 407, WORKFORCE DEVELOPMENT

POLICY 408, SANCTIONS

POLICY 413, GAP IN CRITICAL SERVICES

- **ATTACHMENT A, GAP IN CRITICAL SERVICES LOG AND AUTHORIZED CRITICAL HOURS LOG FORM INSTRUCTIONS**
- **ATTACHMENT A-1 AND 2, GAP IN CRITICAL SERVICES LOG AND AUTHORIZED CRITICAL HOURS LOG FORM**
- **ATTACHMENT B, TELEPHONE SURVEY INSTRUCTIONS AND TEMPLATE**

POLICY 415, PROVIDER NETWORK DEVELOPMENT AND MANAGEMENT PLAN; PERIODIC NETWORK REPORTING REQUIREMENTS

- **ATTACHMENT A, NETWORK ATTESTATION STATEMENT**
- **ATTACHMENT B, NETWORK DEVELOPMENT AND MANAGEMENT PLAN CHECKLIST**
- **ATTACHMENT C, ALTCS E/PD CONTRACTOR SUPPLEMENT**
- **ATTACHMENT D, PROVIDER CHANGES DUE TO RATES REPORT**
- **ATTACHMENT EA, DDD THERAPEUTIC SERVICES NETWORK GAP REPORTING ROSTER**
- **ATTACHMENT EB, HCBS SERVICES NETWORK GAP REPORTING ROSTER**
- **ATTACHMENT F, E/PD AND DDD CUSTOMIZED WHEELCHAIR, CUSTOMIZED HOSPITAL BED, AND AUGMENTATIVE COMMUNICATION DEVICE TIMELINESS REPORT**

POLICY 416, PROVIDER INFORMATION

POLICY 417, APPOINTMENT AVAILABILITY, MONITORING, AND REPORTING

- **ATTACHMENT A, APPOINTMENT AVAILABILITY PROVIDER REPORT**

POLICY 424, VERIFICATION OF PAID SERVICES

- **ATTACHMENT A, QUARTERLY VERIFICATION OF SERVICES AUDIT REPORT**

POLICY 425, SOCIAL NETWORKING

- **ATTACHMENT A, SOCIAL NETWORKING ATTESTATION**

POLICY 426, CHILDREN'S REHABILITATIVE SERVICES REFERRALS, ENROLLMENT, AND COVERAGE

POLICY 431, COPAYMENT

- **ATTACHMENT A, AHCCCS NOTIFICATION TO SET MEMBERS COPAY FLAG TO EXEMPT**

POLICY 432, BENEFIT COORDINATION AND FISCAL RESPONSIBILITY FOR BEHAVIORAL HEALTH SERVICES AND PHYSICAL HEALTH SERVICES

- **ATTACHMENT A, MATRIX OF FINANCIAL RESPONSIBILITY BY RESPONSIBLE PARTY**

POLICY 440, MANAGED CARE EXPIRATION OR TERMINATION OF CONTRACT

POLICY 442, MEMBER WITH A SERIOUS MENTAL ILLNESS' REQUEST TO OPT OUT FROM A REGIONAL BEHAVIORAL HEALTH AUTHORITY TO AN AHCCCS COMPLETE CARE CONTRACTOR

POLICY 445, SUBMISSION OF REQUEST FOR HEARING DOCUMENTS

- **ATTACHMENT A, SUBMISSION OF REQUEST FOR HEARING COVER SHEETS**

POLICY 449, BEHAVIORAL HEALTH SERVICES FOR CHILDREN IN DEPARTMENT OF CHILD SAFETY CUSTODY AND ADOPTED CHILDREN

- **ATTACHMENT A, DCS AND ADOPTED CHILDREN SERVICES REPORTING – ACCESS TO SERVICE**
- **ATTACHMENT B, DCS AND ADOPTED CHILDREN SERVICES REPORTING – CALLS AND RECONCILIATION**

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. These Policies are not in effect until the date referenced in each Policy.

POLICY 100, AHCCCS CONTRACTOR OPERATIONS MANUAL OVERVIEW

POLICY 101, MARKETING

- **ATTACHMENT A, MARKETING ATTESTATION STATEMENT**
- **ATTACHMENT B, MARKETING ACTIVITIES REPORT**

POLICY 106, CERTIFICATION OF MEDICARE ADVANTAGE ORGANIZATIONS SERVING DUAL ELIGIBLE MEMBERS

- **ATTACHMENT A, CMS STATE CERTIFICATION FORM (SAMPLE)**

POLICY 107, STATE-CONTRACTED MEDICARE ADVANTAGE ORGANIZATION DUAL ELIGIBLE SPECIAL NEEDS PLANS

POLICY 108, AHCCCS SECURITY RULE COMPLIANCE

POLICY 314, AUTO-ASSIGNMENT ALGORITHM

POLICY 104, CONTINUITY OF OPERATIONS AND RECOVERY PLAN

- **Attachment A, CONTINUITY OF OPERATIONS AND RECOVERY PLAN CHECKLIST**

POLICY 109, INSTITUTION FOR MENTAL DISEASE 15 DAY LIMIT

- **Attachment A, IMD EXCEEDING 15 DAYS**

POLICY 324, TARGETED INVESTMENTS PROGRAM

POLICY 317, CHANGE IN CONTRACTOR ORGANIZATIONAL STRUCTURE