DATE: July 05, 2019
TO: Holders of the AHCCCS Contractor Operations Manual
FROM: Division of Health Care Management Contracts and Policy Unit
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)

POLICY 103, FRAUD, WASTE, AND ABUSE
Policy was revised for minor formatting and to remove additional details as specified in Attachment C. Effective Date is 07/03/19.

○ ATTACHMENT A,
  Attachment A has been converted to a fillable .PDF document for ease of use.

○ ATTACHMENT A-1,
  No changes.

○ ATTACHMENT B,
  No changes.

○ ATTACHMENT C,
  Attachment C was revised to include additional audit details and combined requirements of the Corporate Compliance External Audit Plan and External Audit Schedule into one deliverable.
Policy 405 was revised for general formatting updates and to align with AHCCCS Complete Care (ACC) Contract/Integration changes (RFP YH19-0001). Policy title was updated to “Cultural Competency, Language Access Plan, and Family/Member Centered Care”.

Effective Date is 07/03/19.

POST-PUBLIC COMMENT CHANGES:

Policy Section II., Definitions has been revised as follows:

| LINGUISTIC NEED | For the purposes of this Policy, linguistic need is defined as the necessity of providing services in the member’s primary or preferred language, including sign language, and the provision of interpretation and translation services. |

Policy Section III., B. has been revised as follows:

The Contractor shall ensure access to oral Interpretation, Translation, sign language, disability-related services, and provide auxiliary aids and alternative formats upon request, and at no cost to the member. Contractors shall provide translation/interpretation services that are accurate, timely, and that protect the privacy and independence of the individual with limited English proficiency. The translation/interpretation services shall be provided by a qualified interpreter/translator. Members are permitted to use an adult accompanying the member with limited English proficiency for translation/interpretation 1) in an emergency when there is no qualified interpreter immediately available or 2) when the member with limited English proficiency requests the accompanying adult to interpret or facilitate the communication, the accompanying adult agrees to provide the communication assistance, and reliance on the accompanying adult for assistance is reasonable under the circumstances. Members are not permitted to rely on a minor child for translation/interpretation except in an emergency when there is no qualified interpreter immediately available.

The availability and accessibility of Translation/Interpretation services should not be based upon the non-availability of a friend or family member who is bilingual. Members may elect to use a friend or relative for this purpose, but should not be encouraged to substitute a friend or relative for a Translation/Interpretation service. A Contractor shall make all members aware that Translation/Interpretation services are available.

Additionally, The Contractor shall ensure access to oral Interpretation, Translation, sign language, disability-related services, and provide auxiliary aids and alternative formats upon request. The services offered shall be provided by an individual who is proficient and skilled in
Translation/Interpretation. Translation/interpretation services shall be provided at no cost to members.

Policy Section III., B., b has been revised as follows:

Added reference:
Refer to ACOM Policy 404 for additional information regarding language, readability, and oral interpretation requirements.

Policy Section III., D., 5 has been revised as follows:

5. Notification of the Availability of Language Assistance at No Cost Processes to ensure meaningful access to the Contractor’s programs, including notifying current and potential members with LEP about the availability of language assistance at no cost. Notification methods may include multilingual taglines in member materials, as well as statements on forms including electronic forms such as agency websites. The results as specified in the Needs and Capacity assessment above should be used to determine the languages in which the notifications should be translated.

- ATTACHMENT A, CULTURAL COMPETENCY, LANGUAGE ACCESS PLAN, AND FAMILY/MEMBER CENTERED CARE REPORTING CHECKLIST

Attachment A title was updated to “Cultural Competency, Language Access Plan, and Family/Patient Member Centered Care Reporting Checklist”.

POST-PUBLIC COMMENT CHANGES:

Attachment A. #14, has been revised as follows:

How written materials critical to obtaining services (also known as vital materials) are made available in the prevalent non-English language spoken for each LEP population in the Contractor’s service area. [42 CFR 438.10(d)(3)]. This includes the requirement for provision of all written materials for members to be translated into Spanish whether or not they are considered vital. Refer to ACOM Policy 404 for additional requirements.

POLICY 412, CLAIMS RECOUPMENT

Policy was revised for general formatting and to align with DDD integration activities. Policy clarified the submission of individual and bundled claim recoupment requests. Additional clarifications were made to the detailed letter of explanation. This Policy will have an implementation date of 10/01/19.
POLICY 449, BH SERVICES FOR CHILDREN IN DCS CUSTODY AND ADOPTED

Revisions made to the policy to address changes to the Contract Chart of Deliverables. In addition the Rapid Response Reconciliation tab in the deliverable was revised to pare down the elements and provide additional guidance. In addition Rapid Response was defined in the policy for clarity of the 72 hour time frame in which the behavioral health service provider is dispatched. Effective Date is 07/03/19

- ATTACHMENT A, CHILDREN IN OUT-OF-HOME PLACEMENT AND IN THE LEGAL CUSTODY OF DCS AND ADOPTED CHILDREN SERVICES REPORTING: ACCESS TO SERVICES

Changes made to Attachment A consist of:
Revised to align with not only the content of the new report but with the policy changes as well to include not only children in the custody of DCS but adopted children as well.
- Report change:
Quarterly report has been updated to track:
  - Number of times the Contractor Coordinated Crisis Services because a Crisis Service Provider was Unresponsive within two hours.
  - Number of times recommended and approved Behavioral Health Services were Accessed Directly by an Out-of-Home or Adoptive Parent that were Provided by a Non-Contracted Provider for 130% fee schedule.
Quarterly report no longer tracks:
  - The number of times a single case agreements or newly contracted providers were used to ensure service accessed in-network instead of out of network at 130% fee schedule
Changes were made due to difficulty tracking of accuracy. The Quarterly information is displayed and was repetitive.

- ATTACHMENT B, CHILDREN IN OUT-OF-HOME PLACEMENT AND IN THE LEGAL CUSTODY OF DCS AND ADOPTED CHILDREN SERVICES REPORTING: CALLS AND EMAILS

Changes made to Attachment B consist of:
- Title Change: Title changed from ‘DCS and Adopted Children Services Reporting Calls and Reconciliation’, to ‘Children in Out-Of-Home Placement and in the Legal Custody of DCS and Adopted Children Services Reporting: Calls and Emails.’
Revised to align with not only the content of the new report but with the policy changes as well to include not only children in the custody of DCS but adopted children as well.
• Report change:
  Monthly report has been updated to track:
  o The total number of calls and emails received by the Child Services Liaison and,
  o The total number of calls and emails received by the After-Hours Line.

  Monthly report no longer tracks:
  o Reasons for communication
  o Initial removal list process
  o Reconciliation process
  o Calculations

Changes were made due to difficulty of accurate tracking.

---

**NEWLY ADDED TO APPROVED NOT YET EFFECTIVE**

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

ACOM APPROVED NOT YET EFFECTIVE

None at this time.

---

**PREVIOUSLY ADDED TO APPROVED NOT YET EFFECTIVE**

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

ACOM APPROVED NOT YET EFFECTIVE

**POLICY 416, PROVIDER INFORMATION**

Policy 416, Drug List tiers are no longer applicable and have been removed. Language was added to clarify that a member has the right to participate in treatment decisions regarding his or her health care, including, the right to refuse treatment. The Provider Manual for the Division of Developmental Disabilities (DDD) shall now include language surrounding Behavioral health assessments and service planning requirements and will be responsible for the oversight of behavioral health services to their members. *This Policy will have an implementation date of 10/01/19.*