

**DATE:** May 18, 2021  
**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](mailto:DHCMContractsandPolicy@azahcccs.gov).

### [INFORMATION REGARDING COVID-19](#)

In response to Medicaid-related questions from providers and contractors arising from the COVID-19 pandemic, AHCCCS has developed a list of Frequently Asked Questions (FAQs) Regarding Coronavirus Disease 2019 (COVID-19) which is updated regularly. It is important to note that there are instances where the information presented in the CMS-approved flexibilities and COVID-19 FAQs does not align with provisions set forth by the AHCCCS Contractor Operations Manual (ACOM). In these instances, the CMS-approved flexibilities and FAQs take precedence and are controlling.

### [NAME CHANGE](#)

Effective April 1, 2021 Comprehensive Medical and Dental Program (CMDP) will be changing to Comprehensive Health Plan (CHP). AHCCCS is in the process of revising all pertinent documents to reflect the new name.

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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 \(ACOM\)](#)

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### [ACOM POLICY 306 – ALTERNATIVE PAYMENT MODEL INITIATIVE – WITHHOLD AND QUALITY MEASURE PERFORMANCE INCENTIVE](#)

ACOM Policy 306 was revised to add language regarding secondary performance measures, intent that Serious Mental Illness (SMI) Contractors will begin participating in the withhold beginning October 1, 2022, and that added language that the performance measure score will not be used to calculate performance in Contract Year End (CYE) 22 due to COVID-19. Policy also clarified language on Minimum Performance Standards (MPS), updated performance measure year to calendar year, and revised definitions and terminology for alignment.

*Policy has a retroactive effective date of 10/01/20.*

○ **ATTACHMENT A – CONTRACTOR ALTERNATIVE PAYMENT MODEL (APM) PERFORMANCE MEASURE STANDARDS**

Attachment A was updated with CYE 21 Performance Measures, including primary and secondary. CYE 18 tab was deleted as it is no longer applicable.  
*Attachment A has a retroactive effective date of 10/01/20.*

○ **ATTACHMENT B – ALTERNATIVE PAYMENT MODEL QUALITY PERFORMANCE MEASURE SCORES**

Attachment B, CYE 21 Tab was updated to align with current practice, CYE 18 tab was deleted as it is no longer applicable.  
*Attachment B has a retroactive effective date of 10/01/20.*

○ **ATTACHMENT C – FEDERAL LIMIT TEST**

Attachment C was revised to align with new performance measures for CYE 21 and included terminology changes.  
*Attachment C has a retroactive effective date of 10/01/20.*

**POST TRIBAL CONSULTATION NOTIFICATION AND PUBLIC COMMENT CHANGES:**

ACOM Policy 306 - Attachment B - was revised to further clarify original changes after being posted for Tribal Consultation Notification/Public Comment on 04/21/21.

**ACOM POLICY 311- CYE 14-18 - RESERVED**

ACOM Policy 311, CYE 14-18, formerly titled “Acute Program Tiered Prospective Reconciliation” has been Reserved as it was only applicable for contract year ending in 2014 through 2018.

○ **ATTACHMENT A – RESERVED**

Attachment A, formerly titled “Acute Program Tiered Prospective Reconciliation example” has been reserved as it was only applicable for contract year ending in 2014 through 2018.

**ACOM POLICY 425 – SOCIAL NETWORKING**

ACOM Policy 425 was revised to include Comprehensive Health Plan (CHP) providing them the option whether to engage in Social Networking activities. Minor updates for clarity and to align with the Contract were also made. In addition, Section D was updated to provide clarity surrounding the expectations to provide the listing of Social Networking Applications to include their Uniform Resource Locator (URL) listing.

○ **ATTACHMENT A – SOCIAL NETWORKING ATTESTATION AND FORM FOR LISTING OF SOCIAL NETWORKING APPLICATIONS AND URLS**

The title of Attachment A was updated from Social Networking Attestation to Social Networking Attestation Statement and Form. Revisions were done to add a section for the Contractor to identify its social networking applications and URLs.

**POST TRIBAL CONSULTATION NOTIFICATION AND PUBLIC COMMENT CHANGES:**

ACOM Policy 425 was revised to further clarify original changes surrounding utilization of the AHCCCS Logo after being posted for Tribal Consultation Notification/Public Comment on 03/22/21.

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**APPROVED NOT YET EFFECTIVE**

**[AHCCCS CONTRACTOR OPERATIONS MANUAL \(ACOM\)](#)**

**ACOM POLICY 106 - CERTIFICATION OF MEDICARE ADVANTAGE ORGANIZATIONS SERVING DUAL ELIGIBLE MEMBERS**

ACOM Policy 106 was revised to address annual October 1, 2021 changes. Full Benefit Dual Eligible Member was added for clarification throughout the Policy. In addition, DES/DDD language was updated to clarify that this Policy applies to their DES/DDD administrative subcontractors.

*Implementation date 10/1/21.*

○ **ATTACHMENT A – RESERVED**

Attachment A, CMS State Certification Form (Sample), is being reserved it is no longer needed.

*Implementation date 10/1/21.*

**ACOM POLICY 107 – STATE-CONTRACTED MEDICARE ADVANTAGE ORGANIZATION DUAL ELIGIBLE SPECIAL NEEDS PLANS**

ACOM Policy 107 was revised to address annual October 1, 2021 changes. Full Benefit Dual Eligible Member was added for use and clarification throughout the policy. In addition, DES/DDD language was updated to clarify that this Policy applies to their DES/DDD administrative services subcontractors. Added Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) agreement requirements for Highly Integrated Dual Eligible Special Needs Plan (HIDE SNP) and Fully Integrated Dual Eligible Special Needs Plan (FIDE SNP) per federal requirements effective

January 1, 2021. Updated the name of Centers for Medicare and Medicaid (CMS) Region IX State Medicaid Agency Contracting unit (SMAC) to CMS Medicare/Medicaid Coordination Office (MMCO) due to changes in CMS responsibilities.

*Implementation date 10/1/21.*

#### **ACOM POLICY 412 – CLAIMS RECOUPMENTS AND REFUNDS**

The title of ACOM Policy 412 has been updated from Claims Recoupments to Claims Recoupments and Refunds. An additional name change was done from Comprehensive Medical and Dental Program (CMDP) to Comprehensive Health Plan (CHP) effective April 1, 2021 due to CHP behavioral health integration. Refer to Laws 2019, 1st Regular Session. Changes were made throughout Policy as applicable. The Policy was also updated to include a statement that Contractors shall not initiate recoupments arising from potential fraud, waste, or abuse, and shall promptly notify AHCCCS Office of the Inspector General (OIG) of such cases. AHCCCS reserves the right to reject recoupment requests of pending encounters where Contractors have failed to demonstrate sufficient effort to correct the root cause analysis of the pending encounters.

*Implementation date 10/1/21.*

#### **ACOM POLICY 417 – APPOINTMENT AVAILABILITY, TRANSPORTATION TIMELINESS, MONITORING, AND REPORTING**

ACOM Policy 417 was revised to address annual October 1, 2021 changes. In addition a name change was done from Comprehensive Medical and Dental Program (CMDP) to Comprehensive Health Plan (CHP) effective April 1, 2021 due to CHP behavioral health integration. Refer to Laws 2019, 1st Regular Session. Changes were made throughout Policy and Attachment as applicable. Language was also added to address that telehealth appointments are considered available appointments for the purposes of compliance with this standard where clinically appropriate.

*Implementation date 10/01/21.*

- **ATTACHMENT A – APPOINTMENT AVAILABILITY AND TRANSPORTATION TIMELINESS REVIEW**

Attachment A was revised to remove and transfer reporting duties from RBHAs to CHP.

*Implementation date 10/1/21.*

#### **ACOM POLICY 439 – MATERIAL CHANGES: PROVIDER NETWORK AND BUSINESS OPERATIONS**

ACOM Policy 439 was revised to address annual October 1, 2021 changes. In addition a name change was done from Comprehensive Medical and Dental Program (CMDP) to Comprehensive Health Plan (CHP) effective April 1, 2021 due to CHP behavioral health integration. Refer to Laws 2019, 1st Regular Session. Changes were made throughout Policy and Attachment as applicable. Language was added regarding to clarify if distance traveled is measured under ACOM Policy 436, compliance with ACOM Policy 436 shall be reported before and after the material change.

*Implementation date 10/1/21.*

○ **ATTACHMENT A – PROVIDER NETWORK/BUSINESS OPERATIONS MATERIAL CHANGE PLAN CHECKLIST**

Attachment A was updated to clarify that if the provider type that is being changed, they should report compliance before and after. As well, if the analysis indicates a change will result in the Contractor failing one or more time and distance standards, the Contractor shall address how it will come back into compliance. Additional language was added regarding if a change involves a new subcontractor, the health plan needs to review the AHCCCS Encounter Manual Chapter 2.

*Implementation date 10/1/21.*

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**PREVIOUSLY ADDED TO APPROVED NOT YET EFFECTIVE**

**ACOM POLICY 101 – MARKETING**

Refer to Revision Memo dated 05/03/21 for summary of changes.

*Implementation Date 10/01/21.*

**ACOM POLICY 401 – CHANGE OF CONTRACTOR: AHCCCS COMPLETE CARE CONTRACTORS**

Refer to Revision Memo dated 05/03/21 for summary of changes.

*Implementation Date 10/01/21.*

**ACOM POLICY 433 – MEMBER IDENTIFICATION CARDS**

Refer to Revision Memo dated 05/03/21 for summary of changes.

*Implementation Date 10/01/21.*

**ACOM POLICY 320 - RESERVED**

Refer to Revision Memo dated 03/02/21 for summary of changes.

*Implementation Date 10/01/21.*

**ACOM POLICY 429, DIRECT CARE WORKER TRAINING AND TESTING PROGRAM**

Refer to Revision Memo dated 10/01/19 for summary of changes.

*Implementation Date Pending.*