

**1620 A - INITIAL CONTACT/VISIT STANDARD**

EFFECTIVE DATE: 02/14/96, 10/01/17

REVISION DATE: 10/01/04, 02/01/05, 09/01/05, 10/01/07, 01/01/11, 05/01/12, 01/01/16,  
07/20/17**I. PURPOSE**

This Policy applies to ALTCS/EPD, DES/DDD; Fee-For-Service (FFS), Tribal ALTCS as delineated within this Policy. Where this Policy references Contractor requirements the provisions apply to ALTCS E/PD, DES/DDD and Tribal ALTCS unless otherwise specified. This Policy establishes an overview of Initial Contact/Visit Standards.

**II. DEFINITIONS**

<b>ENROLLMENT</b>	The process by which an eligible person becomes a member of a Contractor's plan.
<b>CASE MANAGER</b>	Provides direct services to members and must have a degree in social work, be a licensed registered nurse, or have experience serving persons who are elderly and/or persons with physical or developmental disabilities and/or members determined to have a Serious Mental Illness (SMI).

**III. POLICY**

- A. Within seven business days of a new member's enrollment, the assigned or designated case manager shall initiate contact with the member/guardian/designated representative, even when a member is enrolled during a hospital stay. If the member resides in a nursing facility or residential setting or is in an inpatient stay, the contact shall inform the facility of the member's enrollment. Initial contact may be made via telephone, a face-to-face visit, or by letter if the case manager is unable to contact the member by other approaches.
- B. An on-site visit to initiate service planning must be completed by the case manager within 12 business days of the member's enrollment. If information obtained during the initial contact or from the Pre-Admission Screening Tool completed by AHCCCS during the eligibility determination indicates the member has more immediate needs for services, the on-site visit should be completed as soon as possible.
  1. The on-site visit must be conducted at the member's place of residence or institutional setting for members who are enrolled during a hospital stay in order to develop the member's service plan. Confirmation of the scheduled on-site visit is recommended prior to the meeting.
  2. The member must be present for, and be included in, the on-site visit. The member representative must be contacted for care planning, including establishing service

needs and setting goals, if the member is unable to participate due to cognitive impairment, the member is a minor child and/or the member has a legal guardian.

3. Services must be initiated within 30 days of the member's enrollment. Refer to Exhibit 1620-1 for a chart of Case Management Timeframes.
- C. In addition to the requirements outlined above for initial contact, on-site review and service initiation, the assigned case manager shall also participate in proactive discharge planning and follow up activities for members enrolled during an hospital stay as outlined in AMPM Policy 1020. Refer to AMPM Policy 1620-E for requirements regarding on-site reviews following a member's discharge from an inpatient stay in hospital.
  - D. If the case manager is unable to locate/contact a member via telephone, visit or letter, or through information from the member's relatives, neighbors or others, another letter requesting that the member contact the case manager should be left at, or sent to, the member's residence. If there is no contact within 30 calendar days from the member's date of enrollment, the case must be referred to the member's Arizona Long Term Care Services (ALTCS) eligibility worker, via the electronic Member Change Report (MCR) process, for potential loss of contact. A hard copy of the MCR may be found in Exhibit 1620-2.

Only when AHCCCS Division of Member Services staff is also unable to contact the member or representative, will the process of disenrolling the member be initiated.

- E. All contact attempted and made with, or regarding, an ALTCS member must be documented in the member's case file.
- F. The case manager is responsible for explaining the member's rights and responsibilities under the ALTCS program to the member/guardian/designated representative, including the procedures for filing a grievance and/or an appeal. A copy of these rights and responsibilities must also be provided in writing. The member/guardian/designated representative must sign and date a statement indicating receipt of the member rights and responsibilities in writing, that these rights and responsibilities have been explained to them and that they clearly understand them.