

DATE: August 07, 2019

To: Holders of the AHCCCS Medical Policy Manual

FROM: Division of Health Care Management Contracts and Policy Unit

SUBJECT: AHCCCS Medical Policy Manual (AMPM)

This memo describes revisions and/or additions to the AMPM

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 MEDICAL POLICY MANUAL (AMPM)

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

AHCCCS Medical Policy Manual (AMPM)

POLICY 1230-B, RESERVED

Policy 1230-B, Behavioral Health Residential Facilities is being reserved pertinent information can be found in AMPM 320-V, Behavioral Health Residential Facilities.

Policy 1250-G, RESERVED

Policy 1250-G, Nutritional Assessments and Nutritional Therapy is being reserved pertinent information can be found in AMPM 310-GG, Nutritional Therapy, Metabolic Foods, and Total Parenteral Nutrition.

NEWLY ADDED APPROVED NOT YET EFFECTIVE

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

AMPM Approved Not Yet Effective

None at this time.

PREVIOUSLY ADDED APPROVED NOT YET EFFECTIVE

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

AMPM Approved Not Yet Effective

POLICY 570, RESERVED

Policy 570, Community Collaborative Care Teams is being reserved due to Division of Developmental Disabilities integration; collaboration will no longer be needed. *Effective Date* 10/01/19.



POLICY 965, COMMUNITY SERVICE AGENCIES

AMPM Policy 965 was formerly titled AMPM Policy 961-C. Policy was revised to establish expectations for the provision of services to members, remove AHCCCS' role in the credentialing process while maintaining the credentialing standards for AHCCCS Provider Registration, establish requirements for Contractors to collaborate and coordinate credentialing and quality monitoring processes, streamline both the credentialing and quality monitoring processes, and to align direct care staff requirements with AHCCCS Workforce Development as specified in ACOM Policy 407. This Policy is pending Implementation Date.

O ATTACHMENT A, INITIAL APPLICATION AND CREDENTIALING AMENDMENT REQUEST

Attachment A was revised to streamline the information needed for Initial application and credentialing amendment process. This attachment is pending Implementation Date.

O ATTACHMENT B, DOCUMENTATION STANDARDS

Attachment B was originally included within the body of the policy; information regarding documentation standards has been moved to its own Attachment B. This attachment is pending Implementation Date.

O ATTACHMENT C, CRIMINAL HISTORY AFFIDAVIT

Attachment C was updated for minor formatting and alignment with A.R.S. § 8-201, A.R.S. § 36-425.03 (L), A.R.S. § 36-425.03, (F), A.R.S. § 36-425.03 (E), A.R.S. § 36-425.03 (I), A.R.S. § 36-425.03 (H), A.R.S. § 36-425.03 (K), A.R.S. § 41-619.55 (I), A.R.S. § 41-1758.03 (B), and A.R.S. § 41-1758.03 (D). This attachment is pending Implementation Date.

O ATTACHMENT D, SELF-DECLARATION OF CRIMINAL HISTORY

Attachment D was updated for minor formatting and alignment with A.R.S. § 41-1758.03(B) and (D). This attachment is pending Implementation Date.

POST-PUBLIC COMMENT CHANGES:

Policy Section III., A., Overview has been revised as follows:

"CSAs are an essential part of the integrated healthcare network, in large part, because they provide services designed to reduce and/or eliminate functional disabilities and social disadvantages. Physical health Medical and treatment services focus on physical and behavioral health impairment and develop treatment strategies designed to ameliorate them."



Policy Section III., I., 2., d., has been revised as follows:

d. "Develop processes and standards for member medical record reviews for the onsite monitoring review, and"

Attachment A has been revised as follows:

- Page 2, 4 Replaced 'Program Director' with 'Chief Executive Director'
- page 2, Corrected name to 'Arizona Complete Health'
- Page 2, Added checkbox for applicants who will be providing services to members enrolled with CMDP
- Page 2, Modified to clarify documents are only to be submitted with an amendment. Otherwise documents will be requested by the lead contractor for the initial application

Attachment B has been revised as follows:

Page 4, # 5) Establish qualifications of a BHP and BHT to provide supervision of non-clinical services.

Page 4, #6) Establishes *supervision standards* the qualifications for BHPs, and BHTs who provide *supervision* elinical and non-clinical supervision of BHPs, BHTs and BHPPs per A.A.C. R9-10-115 and AMPM Policy 310-B.

Page 11, Documentation consistent with the administrative policies and procedures for ensuring the proper supervision of staff who provide non-clinical services. Documentation shall require verification that BHPs or BHTs providing oversight at least one time during each two week period from a qualified BHP or a BHT.

BHTs and BHPPs provide services under the supervision of a qualified BHP or BHT based upon the competency of the individual employee including but not limited to: direct supervision, oversight, coaching, mentoring, etc.

Documentation shall verify that BHTs and BHPPS are receiving the proper type and frequency of supervision from a qualified BHP or BHT per the CSAs policies and procedures.

BHTs and BHPPs provide non-clinical services under the supervision of a qualified BHP or BHT. Documentation shall verify that BHTs and BHPPS are receiving the proper type and frequency of supervision from a qualified BHP or BHT per AMPM Policy 965, the competency of the individual BHT or BHPP, and the CSAs' policies and procedures.

- Supervisory oversight is provided at least one time during each two week period for individuals determined to be competently providing services and performing job duties.
- Supervision is provided as frequently as is required for individuals determined to lack the competence required to provide services or perform job duties.