

DATE: October 05, 2021

To: Holders of the AHCCCS Medical Policy Manual

FROM: DHCM Contracts and Policy

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.

The Contract and Policy Unit will begin transitioning the Policies from the Approved Not Yet Effective section of the AMPM webpage to the AMPM 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 with each Policy. The transitioned policies have a 10/01/21 effective date.

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 Medical Policy Manual (AMPM). 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) due to Behavioral health integration. Refer to Laws 2019, 1st Regular Session. AHCCCS is in the process of revising all pertinent documents to reflect the new name.

AHCCCS CONTRACT AND POLICY DICTIONARY AND AHCCCS RELATED ACRONYMS

To view the AHCCCS Contract and Policy Dictionary, please access the following link:

AHCCCS CONTRACT AND POLICY DICTIONARY

Consistent with the Arizona Management System (AMS) principles to streamline processes and provide consistency in Policy Development, the Contract and Policy Unit has developed a new AHCCCS Contract and Policy Dictionary. The Dictionary provides a centralized location for definitions that are currently found in the various ACOM and AMPM Policies. The Contract and Policy Dictionary can be found on the AHCCCS website under Resources — Guides-Manuals-Policies. Although currently the Dictionary reflects only definitions from the ACOM and AMPM, in the future it will include definitions from the Contracts as well. Definitions found in the Dictionary will be removed from the ACOM and AMPM Policies as they are published and a hyperlink to the AHCCCS Contract and Policy Dictionary will be included. Some policies have specific terms/definitions that will need to apply to the respective Policy only; those terms/definitions will remain in the Policy and will include a statement indicating the term/definition is applicable 'For purposes of this Policy' only.



To view the AHCCCS Related Acronyms, please access the following link:

AHCCCS RELATED ACRONYMS

Common AHCCCS Related Acronyms can be found on the AHCCCS website under AHCCCS Info – About Us.

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)

AMPM Policy 610 – AHCCCS Provider Qualifications

AMPM Policy 610 was revised to align the definition of Indirect Ownership Interest with 42 CFR 455.101. Instructions were revised to require enrollment through the AHCCCS Provider Enrollment Portal (APEP) and minor formatting was done throughout the policy.

O ATTACHMENT A – AHCCCS PROVIDER TYPES

Attachment A was revised to add a new provider type, CN (Clinical Nurse Specialist) in alignment with AZ HB2068 2019. Additional changes include updating policy references and minor formatting.

O ATTACHMENT B -AHCCCS PROVIDER TYPES SCREENING TOOL

Attachment B was revised to add Clinical Nurse Specialist under the 'Limited Risk Providers' tab as well as minor formatting changes throughout.

AMPM POLICY 710 – SCHOOL BASED CLAIMING PROGRAM

AMPM Policy 710 has been revised to address annual October 1, 2021, changes. An expansion of the Medicaid School Based Claiming (MSBC) program. Including updates to Medicaid reimbursement for the coverage of Direct Service Claiming (DSC) and updates to the Local Education Agency (LEA). The This change allows LEAs to bill Medicaid through DCS for health services delivered to all Medicaid-enrolled students. Additional eligible provider types and services have been added to the Program: Personal Care Services will include bus aides to assist with specialized transportation and use with assistive devices and safety monitoring.

POST TRIBAL CONSULTATION NOTIFICATION AND PUBLIC COMMENT CHANGES:

AMPM Policy 710 was revised to further clarify original changes after being posted for Tribal Consultation Notification/Public Comment on 08/04/21.



AMPM EXHIBIT 1620-3 – UNIFORM ASSESSMENT TOOL AND GUIDELINES

AMPM Exhibit 1620-3 was updated to change client to member throughout the Exhibit and to provide general grammatical and formatting changes.

POST TRIBAL CONSULTATION NOTIFICATION AND PUBLIC COMMENT CHANGES:

AMPM Exhibit 1620-3 was revised to further clarify original changes after being posted for Tribal Consultation Notification/Public Comment on 09/06/21.

AMPM EXHIBIT 1620-7 – FEE-FOR-SERVICE OUT-OF-STATE NURSING FACILITY PLACEMENT REQUEST FORM

AMPM Exhibit 1620-7 has received a general review with minor grammatical and formatting changes. The Policy was revised to update provider identification (ID) numbers.

POST TRIBAL CONSULTATION NOTIFICATION AND PUBLIC COMMENT CHANGES:

AMPM Exhibit 1620-7 was revised to further clarify original changes after being posted for Tribal Consultation Notification and Public Comment on 09/06/21.