



**DATE:** July 30, 2024

**TO:** Holders of the AHCCCS Medical Policy Manual

**FROM:** DHCS Contracts and Policy

**SUBJECT:** AHCCCS Medical Policy Manual (AMPM)

This memo describes additions and/or revisions to the AMPM. For questions regarding policy updates email the Contracts and Policy Unit at: DHCMContractsandPolicy@azahcccs.gov.

#### **NAME CHANGE**

Effective April 1, 2021, Comprehensive Medical and Dental Program (CMDP) changed to Comprehensive Health Plan (CHP) due to Behavioral health integration. Refer to Laws 2019, 1<sup>st</sup> Regular Session. AHCCCS is in the process of revising all pertinent documents to reflect the new name.

## DIVISION OF DEVELOPMENTAL DISABILITIES TRIBAL HEALTH PROGRAM (DDD THP)

The Division of Developmental Disabilities (DDD) Tribal Health Program (THP) is the Fee-For-Service health plan which administers physical health, behavioral health, and Long-Term care Services and Supports (LTSS) for DDD-THP enrolled American Indian/Alaska Native members. Effective April 01, 2022, responsibility for managing acute Physical/Behavioral Health/Children's Rehabilitative Services (CRS), and THP members with a Serious Mental Illness (SMI) designation was transitioned to AHCCCS. AHCCCS is in the process of revising all pertinent documents to reflect this new change.

## **CONTRACT NAME CHANGE**

Effective October 1, 2022, the Regional Behavioral Health Authority (RBHA) for the Managed Care Organization was aligned with the Competitive Contract Expansion YH20-0002 to expand the provision of services for the awarded ACC-RBHA Contractors. AHCCCS is in the process of revising all pertinent documents to reflect this change.

#### **SECTION 504 OF THE REHABILITATION ACT**

Modifications are being made to remove symbols and periods from various Federal and State citations to ensure accessibility for all individuals in compliance with Section 504 of the Rehabilitation Act. AHCCCS is in the process of revising all pertinent documents to reflect this change.





#### 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**

The AHCCCS Contract and Policy Dictionary provides a centralized location for definitions that are utilized in various ACOM and AMPM Policies. A hyperlink to the location of the AHCCCS Contract and Policy Dictionary has been added to all policies found in both the ACOM and AMPM. AHCCCS is in the process of adding an area within the Definition Section of all policies that identifies terms used/referenced in that policy to encourage viewing of the AHCCCS Contract and Policy Dictionary to better understand how AHCCCS defines the word or term. However, some policies have specific terms/definitions that may have a slightly different meaning for that respective Policy; those terms/ definitions will remain in the Policy and will include a statement indicating 'For purposes of this Policy only'.

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

**AHCCCS RELATED ACRONYMS** 

## 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 1620-D – PLACEMENT AND SERVICE PLANNING STANDARD

AMPM Policy 1620-D was revised for minor formatting, grammatical edits, and clarity. Additional substantial changes include but are not limited to:

- Adding electronic signatures in lieu of a wet signature.
- Adding language to ensure copies of the Person-Centered Service Plan (PCSP) are provided in full and maintained in the member's case file.

POST PUBLIC COMMENT CHANGES that concluded on July 01, 2024: Additional revisions were made to AMPM Policy 1620-D based on Public Comment including:

- Adding reference to AMPM Policy 1620-C.
- Alignment with Section 504 of the Rehabilitation Act.





#### AMPM POLICY 1620-E - SERVICE PLAN MONITORING AND REASSESSMENT STANDARD

AMPM Policy 1620-E was revised for minor formatting, grammatical edits, and clarity. Additional substantial changes include but are not limited to:

- Adding clarification that a certified letter is to be sent to the member/HCDM if Case Manager is unable to contact member to schedule a visit.
- Revising "provider" to "Provider Agency" to clarify this is not a Direct Care Worker (DCW).
- Clarifying Tribal ALTCS may report cases to Arizona Department of Health Services (ADHS) if a hospice agency is unable or unwilling to provide medically necessary services.
- Adding reference to Pre-paid Medical Management Information Systems Interface (PMMIS).
- Adding language to incorporate the Case Manager's responsibility to educate family/HCDM on reporting fraud, waste, abuse, exploitation, and other critical incidents.

POST PUBLIC COMMENT CHANGES that concluded on July 01, 2024: Additional revisions were made to AMPM Policy 1620-E based on Public Comment including:

Alignment with Section 504 of the Rehabilitation Act.

#### AMPM POLICY 1620-L – CASE FILE DOCUMENTATION STANDARD

AMPM Policy 1620-L was revised for minor formatting, grammatical edits, and clarity. Additional substantial changes include but are not limited to:

- Adding additional reference to AMPM Exhibit 1620-10.
- Adding language to ensure copies of the AHCCCS Person Centered Service Plan (PCSP) are provided accordingly to members/Health Care Decision Makers (HCDMs).

POST PUBLIC COMMENT CHANGES that concluded on July 01, 2024: Additional revisions were made to AMPM Policy 1620-L based on Public Comment including:

Alignment with Section 504 of the Rehabilitation Act

## AMPM POLICY 1620-O – ABUSE, NEGLECT, AND EXPLOITATION REPORTING STANDARD

AMPM Policy 1620-O was revised for minor formatting, grammatical edits, and clarity. Additional substantial changes include but are not limited to:

- Adding reference to AMPM Policy 1620-E.
- Adding requirements on educating family/HCDM on the family's role in reporting fraud, waste, abuse, exploitation, and other critical incidents.





**POST PUBLIC COMMENT CHANGES that concluded on JULY 01, 2024:** Additional revisions were made to AMPM Policy 1620-O based on Public Comment including:

• Alignment with Section 504 of the Rehabilitation Act.

#### **NEWLY ADDED TO APPROVED NOT YET EFFECTIVE**

## 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 1020 – UTILIZATION MANAGEMENT**

Implementation date 10/01/24

AMPM Policy 1020 was revised for minor formatting, grammatical edits, and clarity. Additional substantial changes include but are not limited to:

- Adding requirements in alignment with the National Committee for Quality Assurance (NCQA)
  Accreditation standards.
- Adding written Utilization Management (UM) decision-making criteria are to be objective and based on medical evidence.
- Adding a list for determining coverage and adding information regarding retrospective decisions.
- Adding Language from ACOM Policy 434 for third party approvals.

**POST PUBLIC COMMENT CHANGES that concluded on JULY 8, 2024:** Additional revisions were made to AMPM Policy 1020 based on Public Comment including:

Clarifying that notification is required within 30 days of the retrospective review request.





# AMPM POLICY 1710 - AHCCCS HOUSING PROGRAM

Implementation date 10/01/24

AMPM Policy 1710 is a new Policy specifying requirements for the AHCCCS Housing Program. Major provisions include:

- Incorporating pertinent language from ACOM Policy 448 as policy will be reserved upon 10/01/24.
- Establishing requirements for the scope of programs and activities included within the AHCCCS Housing Program.
- Duties of the Contractor their providers, the Statewide Housing Administrator, and Housing Contractors.

#### ATTACHMENT A - SUPPORTIVE HOUSING REPORT

Attachment A is a new attachment specifying requirements for the Supportive Housing Report.

POST PUBLIC COMMENT CHANGES that concluded on June 17, 2024: Additional revisions were made to AMPM Policy 1710 and Attachment A based on Public Comment including:

- Adding the reporting requirements are to be followed as indicated in the Contract Chart of Deliverables
- Adding "Or" between SMI and GMH/SU for clarity.
- Revising site-based to the correct term sponsor-based
- Revising to align with Section 504 of the Rehabilitation Act
- For Attachment A, modifying the Referrals Tab to include decline as an option for referrals outcome.