ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM

150 N. 18th Avenue
Phoenix, AZ 85007
602.417.4000

KATIE HOBBS
GOVERNOR

KRISTEN CHALLACOMBE
INTERIM DIRECTOR

DATE: September 16, 2025

TO: Holders of the AHCCCS Medical Policy Manual (AMPM)

FROM: Division of Managed Care (DMC) Contracts and Policy Unit

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: DMCContractsandPolicy@azahcccs.gov.

SECTION 504 OF THE REHABILITATION ACT

Effective May 1, 2024, The Office for Civil Rights (OCR) finalized the rule that prohibits discrimination on the basis of disability. AHCCCS is in the process of revising all pertinent documents 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 NEW AGENCY STRUCTURE

Effective March 3, 2025, AHCCCS unveiled a new Agency structure. AHCCCS is in the process of revising all pertinent documents to reflect the new Division titles. For complete details related to the new Agency structure, please see the press release found on the AHCCCS website under News & Press Releases.

STATEWIDE BRANDING

Effective August 23, 2024, Arizona announced a statewide branding effort. AHCCCS is in the process of revising all pertinent documents to reflect the new AHCCCS Logo, colors, and design elements.

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 offers a centralized location for definitions found within the various AHCCCS Contractor Operations Manual (ACOM) and AHCCCS Medical Policy Manual (AMPM) policies.

To view the AHCCCS Related Acronyms found on the AHCCCS website, please access the following link:
AHCCCS RELATED ACRONYMS

To view all AMPM policies and attachments, please access the following link:
AHCCCS MEDICAL POLICY MANUAL (AMPM)

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NEWLY ADDED TO APPROVED NOT YET EFFECTIVE

AMPM POLICY 570 – PROVIDER CASE MANAGEMENT

Implementation Date 10/01/25

AMPM Policy 570 had substantial changes below that included but were not limited to:

- Revised to add reference to AMPM Policy 930 addressing caseload ratios.
- Revised to add expectations for the Contractor when no provider Case Manager is assigned.
- Clarified Contractor or Provider.
- Clarified that not all General Mental Health/Substance Use members should be assigned to provider Case Managers.
- Added requirements for General Mental Health/Substance Use members.
- Revised to state that the Contractor and provider cannot create other levels of Provider Case Management.
- Revised to allow the Contractor to report levels of Provider Case Management.
- Clarified that siblings of High Needs Case Management children can be assigned to the provider Case Manager.
- Clarified that the Contractor may contract with providers that bill case management but are not contracted to provide Provider Case Management.
- Clarified requirement that monitoring is done by individual Provider Case Managers and not using an average for the clinic.
- Added Contractor requirements to identify providers contracted for providing Case Management.
- Removed requirement of Case Management Plan.

POST PUBLIC COMMENT CHANGES that concluded on 7/14/25:

- Clarified Contractor responsibilities for members not yet established with a Provider.
- Clarified levels of case management.
- Clarified responsibilities for Child and Family Team practice in the absence of an assigned Case Manager.
- Clarified that siblings may be assigned to the same case manager.
- Clarified the Case Manager's responsibility to work with the member/Health Care Decision Maker on service plan goals.
- Clarified that the Contractor Care Managers cannot complete a crisis safety plan but can connect a member to an outpatient provider.

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ATTACHMENT A – PROVIDER CASE MANAGEMENT CASELOAD RATIOS

Attachment A had substantial changes below that included but were not limited to:

- Clarifying that caseloads shall not be blended without prior AHCCCS approval.
- Removal of term Substance Abuse and Mental Health Services Administration.

POST PUBLIC COMMENT CHANGES that concluded on 7/14/25:

- Revised to align with language in Policy for Level of Provider Case Management.
- Revised ratio for evidence-based practice of Assertive Community Treatment.
- Clarified that contact made shall meet the needs of the member.
- Clarified to explain that General Mental Health/Substance Use and DDD members will be assigned to supportive and connective Case Management when necessary and added to the member's service plan.

ATTACHMENT B – HIGH NEEDS CASE MANAGEMENT PROVIDER CASELOADS TEMPLATE

Attachment B is a new attachment to create a High Needs Case Management provider caseloads template for children.

ATTACHMENT C – ADULT PROVIDER CASE MANAGEMENT CASELOADS TEMPLATE

Attachment C is a new attachment to create a High Needs Case Management provider caseloads template for adults.

ATTACHMENT D – PROVIDER CASE MANAGEMENT RATIO EXEMPTION REQUEST

Attachment D is a new attachment to provide a Case Management ratio exemption request.

AMPM POLICY 980 – PERFORMANCE IMPROVEMENT PROJECTS
Implementation Date 10/01/25

AMPM Policy 980 was revised for the substantial changes below that included but were not limited to:

- Revised to update the Performance Improvement Projects (PIPs) design and methodology.
- Removed references to intervention years.
- Revised to align with Centers for Medicare and Medicaid Services (CMS) Performance Improvement Projects (PIP) requirements.
- Revised to align with Centers for Medicare and Medicaid Services (CMS) External Quality Review (EQR) protocols.

POST PUBLIC COMMENT CHANGES that concluded on 7/12/25

Policy was revised to change naming convention of deliverable to Contractor's Performance Improvement Project (PIP) Report and Analysis to align with updated requirements.

ATTACHMENT A – PROTOCOL FOR CONDUCTING PERFORMANCE IMPROVEMENT PROJECTS

Attachment A has been reserved as all information in the protocol is located on the AHCCCS Quality of Care webpage.

PREVIOUSLY ADDED TO APPROVED NOT YET EFFECTIVE

AMPM POLICY 320-T1 – BLOCK GRANTS AND DISCRETIONARY FUNDS
Implementation Date 10/01/25

AMPM POLICY 320-T2 – NON-TITLE XIX XXI SERVICES AND FUNDING (EXCLUDING BLOCK GRANTS AND DISCRETIONARY GRANTS
Implementation Date 10/01/25

AMPM POLICY 320-W – THERAPEUTIC FOSTER CARE FOR CHILDREN
Implementation Date 10/01/25

AMPM POLICY 550 – SERIOUS EMOTIONAL DISTURBANCE IDENTIFICATION
Implementation Date 10/01/25

AMPM POLICY 582 – SUPPORT AND REHABILITATION SERVICES FOR CHILDREN, ADOLESCENTS, AND YOUNG ADULTS
Implementation Date 10/01/25

AMPM POLICY 950 – CREDENTIALING AND RECREDENTIALING PROCESSES
Implementation Date 10/01/25

AMPM POLICY 960 – QUALITY OF CARE CONCERNS
Implementation Date 10/01/25

AMPM POLICY 963 – PEER AND RECOVERY SUPPORT SERVICE PROVISION REQUIREMENTS
Implementation Date 10/01/25

AMPM POLICY 964 – CREDENTIALED FAMILY SUPPORT PARTNER REQUIREMENTS
Implementation Date 10/01/25