

DATE: October 31, 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**](#)

CURRENT UPDATES AND REVISIONS TO THE AHCCCS MEDICAL POLICY MANUAL (AMPM)

AMPM POLICY 310-DD – COVERED TRANSPLANTS AND RELATED IMMUNOSUPPRESSANTS MEDICATIONS

Retroactive Effective Date 10/01/25

AMPM Policy 310-DD had substantial changes that include but were not limited to:

- Revised to include reference to AHCCCS Reinsurance Manual as an additional resource.
- Added reference for Fee For Service (FFS) Prior Authorization (PA) requirements.

ATTACHMENT A – EXTENDED ELIGIBILITY PROCESS/PROCEDURE FOR COVERED SOLID ORGAN AND TISSUE TRANSPLANTS

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

- Removed language regarding status letters from transplant facilities.
- Added an introduction explanation of options available.
- Revised to include stem cell transplant.

AMPM POLICY 310-GG – NUTRITIONAL ASSESSMENT AND NUTRITIONAL THERAPY

AMPM Policy 310-GG had substantial changes that include but were not limited to:

- Added definition for Medical Nutritional Therapy.
- Added clarifying language to include interventions with assessments.

ATTACHMENT A – AHCCCS CERTIFICATE OF MEDICAL NECESSITY FOR COMMERCIAL ORAL NUTRITIONAL SUPPLEMENTS, FOR MEMBERS 21 YEARS OF AGE AND OLDER – INITIAL AND ONGOING REQUESTS

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

- Revised to include Fee For Service (FFS) Program.

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

[AHCCCS MEDICAL POLICY MANUAL \(AMPM\)](#)