CHAPTER 10 - REFERRALS TO SPECIALISTS

REVISION DATE: 5/5/2017, 4/16/2014
EFFECTIVE DATE: March 29, 2013

Members served by the Division of Developmental Disabilities (Division), who are AHCCCS eligible (Medicaid and DD/Arizona Long Term Care System [ALTCS]), may be referred to a specialist for their medical needs. The Primary Care Provider is responsible for initiating, coordinating, and documenting referrals to specialists.

Referrals to Specialists: Physical Health

Primary Care Providers (PCPs) must deem a specialist referral to be medically necessary. Members served by a Division subcontracted health plan must still adhere to AHCCCS and Division requirements for referral to a specialist for a medical need. This information is located in the member handbook for each of the Division’s subcontracted health plans.

The Division subcontracted health plan each have their own procedures for referrals to specialists and for authorization. However, referrals to medical specialists must still align with AHCCCS and Division requirements for specialists referrals as defined in the AHCCCS Medical Policy manual (AMPM).

Any Division American Indian Health Plan (AIHP) member utilizing a non-IHS/638 provider or facility rendering AHCCCS covered services must obtain prior authorization from the Division Prior Authorization Unit for specialist services. Prior Authorization is not required for Fee-for-service (FFS) members receiving services from Indian Health Service/638 (IHS/638) providers and facilities.

For Prior Authorization, providers must be prepared to submit the following information:

A. Provider name and provider ID
B. Member/patient name and AHCCCS ID number
C. Type of specialist/service
D. Service date
E. ICD-10 diagnosis code(s)
F. CPT or CDT procedure code(s) or HCPCS code(s)
G. Anticipated charges (if applicable), and
H. Medical justification.

Division Prior Authorization Unit staff, upon receipt and assessment of information provided, will issue to the requesting provider an approval, a provisional prior authorization number, or notify the provider of a denial of coverage.
Referrals to Specialists: Behavioral Health

Members served by the Division who are AHCCCS eligible (Medicaid and DD/ALTCS) may receive behavioral health services from the Regional Behavioral Health Authority (RBHA) provider in their community. Division members who are AHCCCS eligible and are also American Indian may access behavioral health services through the RBHA, Tribal Behavioral Health Authority (TRBHA) or Indian Health Service Facilities (https://www.azahcccs.gov/AmericanIndians/AmericanIndianHealthFacilities/).

A provider can make a referral on behalf of a member to the RBHA, TRBHA or an Indian Health Service Facility. The referral for screening, assessment and ongoing behavioral health services is made by calling the member services department at the behavioral health service provider, RBHA, TRBHA or an Indian Health Service Facility.

Regional Behavioral Health Authorities (RBHA)

A. Maricopa County – Mercy Maricopa Integrated Care (MMIC)

Mercy Maricopa Integrated Care Member Services
602-586-1841
1-800-564-5465
Hearing Impaired TTY/TDD 711

Crisis Line:
602-222-9444 (Maricopa County)
1-800-631-1314

B. Apache, Coconino, Gila, Mohave, Navajo, and Yavapai Counties – Health Choice Integrated Care (HCIC)

Health Choice Integrated Care Member Services
1-800-640-2123
1-800-367-8939

Crisis Line:
1-877-756-4090
1-800-367-8939 (Hearing Impaired)

C. Cochise, Graham, Greenlee, La Paz, Pima, Pinal, Santa Cruz, and Yuma Counties – Cenpatico Integrated Care (CIC)

Cenpatico Integrated Care Member Services
1-866-495-6738
TDD/TTY: 1-877-613-2076

Crisis Line:
1-866-495-6735
TDD/TTY: 1-877-613-2076
Tribal Regional Behavioral Health Authorities (TRBHA)

A. **Gila River Regional Behavioral Health Authority**

Member Services:
1-888-484-8526, ext. 7010
520-562-3321, ext. 7010
602-528-7100

Crisis Line:
1-800-259-3449

B. **White Mountain Apache Regional Behavioral Health Authority**

Member Services and Crisis Line:
1-928-338-4811 or
1-877-336-4811

C. **Pascua Yaqui Tribe**

Member Services:
Tucson: 1-520-879-6060
Guadalupe: 480-768-2000

Crisis Line during Business Hours:
Tucson: 520-879-6060
Guadalupe: 480-768-2000

Crisis Line after hours, weekends, and holidays:
Tucson: 520-591-7206
Guadalupe: 480-736-4943

AHCCCS Covered Behavioral Health Services

AHCCCS Covered Behavioral Health Services include:

A. Behavior Management (behavioral health personal assistance, family support/homecare training, self-help/peer support)

B. Behavioral Health Case Management Services

C. Behavioral Health Nursing Services

D. Behavioral Health Therapeutic Home Care Services (formerly known as Therapeutic Foster Care)

E. Emergency/Crisis Behavioral Health Care
F. Emergency and Non-Emergency Transportation
G. Evaluation, Assessment and Screening
H. Individual, Group and Family Therapy and Counseling
I. Inpatient Hospital Services
J. Institutions for Mental Disease (with limitations)
K. Laboratory and Radiology Services for Psychotropic Medication Regulation and Diagnosis
L. Non-Hospital Inpatient Psychiatric Facilities (residential treatment centers and sub-acute facilities)
M. Opioid Agonist Treatment
N. Partial Care (supervised day program, therapeutic day program and medical day program)
O. Psychosocial Rehabilitation (living skills training; health promotion; supportive employment services)
P. Psychotropic Medication Adjustment and Monitoring
Q. Respite Care.

**Coordination of Care**

Once a referral is made, the provider will contact the member and/or the responsible person to complete the referral. Division contracted providers may also contact the member’s Support Coordinator for assistance. The assigned coordinator will assist in care coordination. When the provider or agency does not have the Support Coordinator’s contact information they may call the Division’s Central Office at 602-524-0419. They then provide the Division’s operator with the name of the member and the operator will provide the Support Coordinator’s information.