

AzEIP and AHCCCS FAQ

1) Who does the new AzEIP AHCCCS Procedures apply to?

This applies to any child who is acute care AHCCCS eligible, and the child is not eligible for ALTCS through DDD. For AHCCCS eligible children who are initially identified by AzEIP as requiring therapy services (and not already receiving therapy services through the health plan), list the AzEIP TBEIS provider as the requested provider for the service and the healthplan will assign the AzEIP provider whether or not the provider has a contract with the health plan.

It is important to note that continuity of care is an important hallmark of the AHCCCS health plans. For this reason, when children are already receiving services through their AHCCCS health plan, and then referred to AzEIP, they will continue to receive their services through the health plan assigned provider. As the IFSP team is developing the outcomes, they should ask the family what supports they are receiving from their healthplan which might support the achievement of the outcome. Next the IFSP team should ask if that support is sufficient, or if there are additional needs for which the IFSP team may assist the child and family. The AzEIP services should not replace the healthplan services, nor is this an attempt to simply provide more services. The IFSP team should be able to articulate how the provision of AzEIP services are necessary to supplement the health plan services and how they will support the child to increase their engagement and participation in everyday routines and activities.

2) Who is responsible for completing the AzEIP AHCCCS Member Service Request form? Who needs a copy?

The AzEIP service coordinator is responsible for completing the form and submitting it to the health plan within 2 business days of the IFSP team meeting. The form should be sent to the appropriate MCH coordinator for the health plan and a copy should be kept in the child's record. If service coordination is provided by staff from DDD or ASDB, a copy should be provided to the AzEIP provider to support their ability to bill the AHCCCS health plan for services provided the child and family.

3) What if a child is being served through the CRS program?

The purpose of the CRS plan is to ensure that AHCCCS eligible children with certain complex medical conditions have access to a team of specialized professionals. This team, much like the TBEIS team, is expected to work collaboratively across disciplines. When a child who is enrolled in CRS, or is potentially CRS eligible, is referred to AzEIP, the AzEIP team should note the supports and services provided by CRS on the other services page.

As the IFSP team is developing the outcomes, they should ask the family what supports they are receiving from the CRS team which might support the achievement of the outcome. Next the IFSP team should ask if that support is sufficient, or if there are additional needs for which the IFSP team may assist the child and family. The AzEIP services should not replace the CRS services, nor is this an attempt to simply provide more services. The IFSP team should be able to

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articulate how the provision of AzEIP services are necessary to supplement the CRS services and how they will support the child to increase their engagement and participation in everyday routines and activities.

4) What if we evaluate a child enrolled in AHCCCS and they are not AzEIP eligible but the child has developmental delays?

If the Multidisciplinary Evaluation Team (MET), determines that an AHCCCS eligible child is not eligible for AzEIP, the AzEIP service coordinator should use the AzEIP AHCCCS Member Service Request form to send a copy of the developmental evaluation report to the appropriate MCH coordinator, noting in the Expected Outcomes section that the child is not eligible for AzEIP, however, the evaluation demonstrates that the child has a mild or moderate developmental delay in the following area(s): (and include those identified domains).

5) How does this impact children getting ready to transition?

Transition from AzEIP is more than transitioning to preschool special education. For children who are AHCCCS eligible the AzEIP service coordinator should discuss whether or not the family believes the child will continue to need therapy services as part of the Transition Planning Meeting. If the child is AHCCCS eligible the service coordinator should use the AzEIP AHCCCS Member Service Request form, include the most recent IFSP and quarterly progress report and submit the packet to the appropriate MCH coordinator, noting that the child will be exiting AzEIP on the day before the child's third birthday. This will enable the MCH coordinator to identify a service provider to assist with any continuing therapy needs.

6) What happens when a family has both private and public insurance, what is the process for ensuring that we utilize all funding sources?

- IFSP team identifies services on the IFSP to achieve the outcome(s)
- Parent consents to use both public and private insurance
- Consent to Bill Insurance form completed by the SC
- SC submits AzEIP AHCCCS Member Services Request Form and AzEIP TBEIS provider submits an authorization request to the private health insurance plan
- Private health insurance and/or AHCCCS health plan authorizes or denies service
- EIP provides service
- AzEIP TBEIS provider bills private insurance and if it doesn't pay in full, then bills AHCCCS (if AHCCCS health plan approved service) for the remainder of the payment.