



DEPARTMENT OF ECONOMIC SECURITY

Your Partner For A Stronger Arizona

DIVISION OF DEVELOPMENTAL DISABILITIES

Sent on Behalf of DES/DDD

THERAPY SERVICES AND THE CERTIFIED PLAN OF CARE PROCESS (CPOC)

Target Audience - Qualified Vendors and Providers of Therapy Services

Transmittal Date - 01/06/2021

The Department of Economic Security (DES), Division of Developmental Disabilities (DDD) provides individuals with intellectual and developmental disabilities services and supports to help them lead self-directed, healthy and meaningful lives. DDD is continuously looking for ways to improve services and service delivery to achieve this goal. In 2020, new tools and processes were developed for therapy services. Over the last few months, the Division has gathered feedback from [Qualified Vendors of therapy services](#). Based on this feedback, the Division has updated the Certified Plan of Care form. The new QPR-POC form can be downloaded at <https://des.az.gov/sites/default/files/dl/DDD-2063A.pdf?time=1609942451892>.

The Certified Plan of Care (CPOC) Process

- The Evaluation Screening Tool helps the member's planning team decide what services are needed. The CPOC helps the team to achieve a more coordinated and integrated treatment plan.
- The member or their responsible person must obtain a prescription from the member's Primary Care Provider (PCP) or an attending Physician, including a Medical Doctor (MD), Doctor of Osteopathy (DO), Physician Assistant (PA), or Nurse Practitioner (NP) for the therapy evaluation. After receiving the prescription, the Support Coordinator starts the vendor call process to identify a therapy vendor that can complete the evaluation as ordered. When the therapy vendor is identified, the Support Coordinator will assign the service to the identified vendor to conduct the evaluation.
- Upon receiving a completed evaluation recommending therapy services and the CPOC, and after any questions/concerns are addressed, the Support Coordinator will enter a therapy authorization into Focus in accordance with the evaluation and CPOC.
- If therapy is needed, the Authorization start date is the date the Plan of Care (POC) is certified by the member's PCP or attending Physician including Medical Doctor (MD), Doctor of Osteopathy (DO), Physician Assistant (PA), or Nurse Practitioner (NP). The POC becomes certified when it is dated and signed by the prescriber including their National Provider Identifier (NPI). Once the Medical Provider signs the POC, it becomes a CPOC.
- The authorization end date is based on the duration indicated by the CPOC.
- Thirty (30) days in advance of the identified end of the certification period, the therapist will complete a new POC. The member's Support Coordinator will then authorize therapy services after receiving the updated CPOC.

The Division recently reviewed the CPOC process and updated forms with Support Coordinators(s) and Supervisors. The Division is extending the deadline for vendors to bring all members' records into compliance with the CPOC requirements to March 31, 2021.