

QUALITY MANAGEMENT BULLETIN - JANUARY 2026

Target Audience - Qualified Vendors and Providers

Transmittal Date - 01/29/2026

This month's bulletin covers topics on robust incident reporting, medication management, program monitoring guidance, and AHCCCS QM Portal migration information.

Incident Reporting

To ensure timely reviews and accurate follow-up, all incident reports must include clear, detailed, and complete information. Thorough documentation is critical to ensuring the appropriate individuals can be contacted without delay.

Incident Report Details

When submitting an incident report, as much specific information as possible should be included:

- Date(s) and time(s) of the incident and any related events
- A detailed description of what occurred
- If medications were missed:
 - Name of the medication
 - Scheduled dose and time
 - Reason the medication was missed
 - All attempts that were made to obtain or administer the medication
- Interactions with others related to the incident, including:
 - Names and job titles
 - Dates and times of interactions
 - Summary of discussions or observations

Required Contact Information

Each incident report must include complete and accurate contact information for all individuals involved, including:

- Report submitter: full name, job title, phone number, and email address
- Staff involved: full names, job titles, phone numbers, and email addresses
- Witnesses (if applicable): full names, relationship to the incident, and best contact information
- Other providers involved, when applicable

This information is required to ensure investigators can contact the correct individuals and that those individuals are aware they may be contacted for follow-up.

Staff Notification and Timely Response

All staff listed in an incident report must be informed that DDD QMU investigators may reach out to obtain additional information. Staff are expected to:

- Respond promptly to all outreach attempts, including returning calls or emails as soon as possible, to prevent delays in the investigation process

Reporting on Another Provider

When submitting an incident report involving another provider, please ensure that:

- All relevant information is entered in the appropriate section of the report
- Information is complete and accurate prior to submission

Complete and timely reporting is essential to maintaining compliance and supporting effective incident review.

AHCCCS Portal Migration Update

On November 1, 2025, the Division implemented a new process requiring Qualified Vendors to enter incident reports directly into the AHCCCS QM Portal. The Division published a revised Provider Manual Chapter 70 in December 2025 that includes the requirement for submitting all reportable incidents directly into the AHCCCS QM Portal. Effective March 1, 2026, the Division will no longer accept hard copy incident reports submitted through the District Incident reporting mailboxes. Qualified Vendors are required to submit all reportable incidents into the AHCCCS QM Portal. The only exception will be Qualified vendors in rural communities without reliable internet access.

The Division strongly encourages Qualified Vendors who have not yet created an account within the AHCCCS QM Portal to begin this process immediately. Guidelines for account creation can be located on the [AHCCCS QM Portal FAQ](#) page under the registration tab. Qualified Vendors should follow the [Provider User Guide](#) to create your Master and necessary sub-accounts. Qualified Vendors with questions about creating their account can also refer to the [Vendor Announcement published on January 23, 2026](#).

AHCCCS QM Portal - Contractor/TRBHA Selection

The Division continues to identify reportable incidents being sent to the incorrect Health Plan within the AHCCCS QM Portal. The Division sent a [Vendor Announcement published on November 5, 2025](#), reminding Qualified Vendors to ensure the Contractor/TRBHA field is changed to the Division. As a reminder, Qualified Vendors are required to ensure all reportable incidents are sent to the Division through the AHCCCS QM Portal. Below is an excerpt from the [User Guide](#) detailing the required process:

Member Information Setup

REQUIRED: Use the drop-down to update the Contractor/TRBHA field to: **110007 - LTC DD DES**.

The AHCCCS QM Portal automatically populates the Member's current physical/behavioral health plan in the Contractor/TRBHA field. For DDD members, you will see either 010158 - UnitedHealthCare or 010306 - Mercy Care Plan. This section must be updated for the IAD to be sent to the Division, **110007 - LTC DD DES**.

Pharmacy Corner

Medication Management - Planning Ahead for Medication Refills

Over the past four months, the Division has noted an increase in members utilizing emergency

departments solely to obtain medication refills. To improve member experience and ensure continuity of care, we recommend the following strategies to prevent medication gaps.

Utilization of Mail Order Services

Mail-order pharmacies are an excellent resource for managing chronic medications and reducing the risk of a member running out of essential supplies.

- Medicaid-Only Members: Review the member's specific health plan, as most plans offer a mail-order pharmacy option for maintenance medications.
- Dual-Eligible Members (Medicare & Medicaid): For members with dual coverage, the primary recommendation is to contact the Medicare Part D plan directly to verify mail order availability for their chronic prescriptions.

Best Practices for Continuity of Care

- Proactive Scheduling: Encourage members to schedule follow-up appointments at least two weeks before their final refill expires.
- 90-Day Prescriptions: Where appropriate and covered by the plan, consider transitioning members to 90-day supplies for stable, chronic conditions.
- Pharmacy Sync: Suggest that members work with their local or mail order pharmacist to "sync" refill dates, reducing the number of monthly trips or shipments.

Medication Logs

Medication log requirements for DDD Group Homes are found in [Article 8 - A.A.C. R6-6-806.G](#). The following 7 items must be included in a medication log. During each unannounced routine quality review visit from Program Monitoring, the medication log will be reviewed to ensure it contains all required information, and the record is accurate.

G. The licensee shall maintain a log of all prescribed and nonprescribed medications administered to a client by or under the supervision of direct care staff. The medication log shall contain, at a minimum:

1. The name of the client who received the medication;
2. The name of the medication;
3. The medication dosage;
4. The date and time of administration;
5. The route of administration;
6. Special instructions for administration of the medication; and
7. Signature and initials of the direct care staff who administered or supervised the administration of the medication.

Additionally, each medication administered by or under the supervision of direct care staff to a member must be filled by a pharmacy or be accompanied by a written order from the individual's physician. A change in a prescription authorized by a verbal order is supported by a new pharmacy label or written authorization by a medical practitioner within 72 hours of the verbal order. The information on the medication log should match the physician's authorization (prescription) or the label on the medication that is filed by a pharmacy.

A.A.C. R6-6-806.F

F. For medications administered by or under the supervision of the direct care staff, the licensee shall ensure that any prescription or non-prescription medications are administered:

1. To a client only with the written or verbal orders of a medical practitioner; and
2. Only to the person for whom it is prescribed or indicated.

2026 Program Monitoring Focuses

The Program Monitoring Unit will continue to review all programmatic and contractual requirements for each area throughout the year. This includes implementing the HCBS Rules in any Service Setting.

Staff Training and Qualifications

Employees found not to have met the necessary requirements, including all required and mandatory background checks, must be placed in a non-working status until the documents are completed. The requirements can be reviewed in the [Staff Training & Qualifications Quick Reference Guide](#).

Behavior Plans

Ensuring Behavior Plan requirements are in place for all members who need a plan. Qualified Vendors who need additional assistance should contact their PRC representative or discuss them with the planning team at the member's next scheduled Person Centered Service Planning meeting. Questions for PRC may be sent to dddprcadministration@azdes.gov.

Qualified Vendors who receive a request from the Network Team regarding a Behavior Plan should respond to the DDD employee who made the request or to providernetworksupport@azdes.gov. The Network team is focusing on notifications to Qualified Vendors that are responsible for member-specific plans that need to be in place. This notification is not coming from the Program Monitoring team. The [Program Monitoring team](#) is responsible for the program monitoring process and providing technical assistance on any findings identified during the monitoring review.

New Contacts for Program Monitoring Managers

[Ryan Salek](#) - Group Homes, Behavioral Supported Group Homes, Nursing Supported Group Homes, State Operated Homes and Intermediate Care Facilities- HCBS Rules Implementation

[Diana Taylor](#) - Day Program Adult/Child, Developmental Homes (onsite), Supported Living/IDLA and HCBS Rules Implementation. Corrective Action Coordination team.

[Aurelia Sigarroa](#) - InHome Services (HCBS), Dev Home Vendor Level reviews, Direct Care Worker Training and Testing Sites.

Direct Care Services Supervisory Visits

On January 12, 2026, AHCCCS published updated clarification and guidance in response to inquiries from provider agencies regarding supervision requirements for Direct Care Workers (DCWs) providing Direct Care Services. The Division [published a copy of their announcement](#) and sent it to all Qualified Vendors on January 13, 2026. Qualified Vendors providing in-home services are encouraged to review that vendor announcement and familiarize themselves with the supervisory visit requirements. In September 2025, the Division updated its [Service Delivery Monitoring and Supervisory Visit Documentation Form Instructional Guide](#) to align with the requirements outlined in the AHCCCS memo.

As always, thank you for your time, attention, and continued commitment to the members we serve.

For all QM inquiries, please contact one of the following District emails.

- District Central - DDDCentralIR@azdes.gov
- District East - DDDEastIR@azdes.gov
- District North - DDDDistrictNorthIncidentReports@azdes.gov
- District South - DDDD2IR@azdes.gov
- District West - DDDWestIR@azdes.gov