



## DEPARTMENT OF ECONOMIC SECURITY

*Your Partner For A Stronger Arizona*

# DIVISION OF DEVELOPMENTAL DISABILITIES

Sent on Behalf of DES/DDD

## POLICY UPDATE

Target Audience - Qualified Vendors and Providers

Transmittal Date - 05/10/2024

The Division of Developmental Disabilities Policy Unit has three new policies, 14 revised policies, and three retired policies to report this week. Policies may be viewed by accessing the [Policies screen](#) located on the Division's website.

### NEW POLICIES

#### [Division Medical Policy Manual 580 Child and Family Team](#)

New Division Medical Policy 580 Child and Family Team, respectively, is a new policy replacing 580 Behavioral Health Referral Process.

The new 580 policy, Child and Family Team, has been developed in compliance with AHCCCS contractual obligations and development of the new AHCCCS Medical Policy 580, and also used the same numbering convention as AHCCCS.

The Child and Family Team policy has been developed to lay the foundation of Child and Family Team Practice that provides a universal Child and Family Team system of care; indicators that contribute to the complexity of needs for the child and family; how the Child and Adolescent Level of Care Utilization System is utilized; and how the essential Child and Family Team practice activities are implemented on individualized needs.

The Policy also incorporates pertinent information from the former AHCCCS Behavioral Health Practice Tool 220 and is an optional resource for the Tribal Health Program, but not a requirement for FFS providers.

#### [AdSS Medical Policy Manual 580 Child and Family Team](#)

New AdSS Medical Policy 580, Child and Family Team, respectively, is a new policy replacing 580 Behavioral Health Referral and Intake Process.

The new 580 policy, Child and Family Team, has been developed in compliance with AHCCCS contractual obligations and development of the new AHCCCS Medical Policy 580, and also used the same numbering convention as AHCCCS.

The Child and Family Team policy has been developed to lay the foundation of Child and Family Team Practice that provides a universal Child and Family Team system of care; indicators that contribute to the complexity of needs for the child and family; how the Child and Adolescent Level of Care Utilization System is utilized; and how the essential Child and Family Team practice activities are implemented on individualized needs.

The Policy also incorporates pertinent information from the former AHCCCS Behavioral Health Practice Tool 220 and is an optional resource for the Tribal Health Program, but not a requirement for FFS providers.

## [Division Operations Policy Manual 7006 Right to Request Amendment or Correction of Protected Health Information](#)

This new policy has been developed to outline the requirement when a Member requests an amendment of their Protected Health Information (PHI) as permitted by the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

### **REVISED POLICIES**

#### [Division Medical Policy Manual 310-J Hospice Services](#)

This is a revised policy that outlines the Division's commitment to the availability of Hospice Services.

Description of changes:

1. This policy has been revised with current Division Policy Unit formatting standards.
2. The definition section has been updated to reflect current definitions.
3. This policy now has a Supplemental Information section that includes information pertaining to Hospice services.

#### [AdSS Medical Policy Manual 310-J Hospice Services](#)

This is a revised policy that establishes requirements for the Division's Administrative Services Subcontractors (AdSS) pertaining to the coverage of Hospice Services.

Description of changes:

1. This policy has been revised with current Division Policy Unit formatting standards.
2. The definition section has been updated to reflect current definitions.
3. This policy now has a Supplemental Information section that includes information pertaining to Hospice services.

#### [Division Medical Policy Manual 320-O Behavioral Health Assessments, Service, and Treatment Planning](#)

Division Medical Policy 320-O, Behavioral Health Assessments, Service, and Treatment Planning, respectively, has been updated to comply with recent AHCCCS updates to AMPM 320-O as follows:

- Several sections of the policy removed and reorganized accordingly.
- Title change from "Behavioral Health Assessments and Treatment/Service Planning" to "Behavioral Health Assessments, Service, and Treatment Planning" to align with AMPM 320-O.
- The term "Crisis and Safety Plan" updated to "Safety Plan."
- Definition of "Health Home" removed, as well as references within the policy.
- Added clarifying language for behavioral health assessments, service, and treatment planning, coordination requirements, and the addition of Serious Emotional Disturbance population applicability.
- Added language regarding positive substance use results may be shared only if the member has authorized sharing of protected health information (45 CFR 160.103).

#### [AdSS Medical Policy Manual 320-O Behavioral Health Assessments, Service, and Treatment Planning](#)

AdSS Medical Policy 320-O, Behavioral Health Assessments, Service, and Treatment Planning, respectively, has been updated to comply with recent AHCCCS updates to AMPM 320-O as follows:

- Several sections of the policy removed and reorganized accordingly.
- Title change from "Behavioral Health Assessments and Treatment/Service Planning" to "Behavioral Health Assessments, Service, and Treatment Planning" to align with AMPM 320-O.

- The term “Crisis and Safety Plan” updated to “Safety Plan.”
- Definition of “Health Home” removed, as well as references within the policy.
- Added clarifying language for behavioral health assessments, service, and treatment planning, coordination requirements, and the addition of Serious Emotional Disturbance population applicability.
- Added language regarding positive substance use results may be shared only if the member has authorized sharing of protected health information (45 CFR 160.103).

#### [Division Medical Policy Manual 520 Member Transitions](#)

This policy has been revised to establish requirements applicable to the Division of Developmental Disabilities (Division) to identify and facilitate Member transitions between the Administrative Services Subcontractors (AdSS), the Division, and other Arizona Health Care Cost Containment System (AHCCCS) contractors and the Division’s oversight of the AdSS to include:

- Added definitions for Member Care Transition
- Deleted definition for Medical Equipment, Appliances and Member Contractor Care Transition, Receiving Contractor, and Relinquishing Contractor
- Added a statement where the Division shall receive transitioning Fee for Service (FFS) Member information via automated electronic transfer file access through the AHCCCS Secured File Transfer Protocol (SFTP) Server
- Added a statement where the Division shall develop policies or protocols to address the transition of Members with certain medical conditions
- Added a statement where the Division shall accept the electronic ETI Form submitted by the relinquishing Contractor
- Added a statement where the Division shall require that the AdSS provides a minimum 90 calendar day transition period allowing the Members with Special Health Care Needs to continue seeking care from their previously established PCP that does not participate in the AdSS network while the
- Responsible Person, Support Coordinator, Care Manager or Provider Case Manager identifies an alternative PCP within the AdSS provider network
- Added a statement where the Division shall require that the relinquishing AdSS coordinate transition with the receiving AdSS, Contractor, or Tribal ALTCS if a Member is approved for ALTCS enrollment
- Added a statement where the Division shall require applicable protocols are followed for any special circumstances of the Member and that continuity and quality of care is maintained during and after the transition as specified in ACOM Policy 402 and AMPM Policy 1620
- Added criteria for the Division ensuring transitions for Members involving co-occurring behavioral and physical health conditions
- Added a statement where the Division shall require ALTCS eligible Members under age 21 receiving Licensed Health Aide services to be engaged in transition planning and communication, if offered to families prior to the Member’s 21st birthday
- Added a statement where the Division shall require Members under age 21 receiving Licensed Health Aide services are engaged in transition planning and communication, if offered to families prior to the Member’s 21st birthday
- Added a statement where the Division shall ensure LHA services are not provided to Members 21 years and older as specified in AMPM Policy 1240-G and A.A.C. R4-19-901

- Added a statement where the Division shall be responsible for transplant related components up to and including completion of the service components that the Member is receiving at the time of the change. The receiving health plan is responsible for the remainder of the components of the transplant
- Added a statement where the Division shall allow Members receiving behavioral health medications from the PCP simultaneously receive counseling and other medically necessary services
- Added a statement where the Division shall require the Member to have a 90-day trial period to determine if the ACD will be effective for the Member, or if it should be replaced with another device
- Added criteria for the a 90-day trial period if a Member transitions from an AdSS or Contractor
- Added a statement where the Division Transition Coordinator shall notify the Division Behavioral Health Administration and Support Coordinator of all Member transitions between health plans in which Members are receiving behavioral health services, including therapeutic foster care
- Removed the section for Out of Service Area Placement Referrals for Members with an SMI Designation

### [AdSS Medical Policy Manual 520 Member Transitions](#)

This policy has been revised to establish the Administrative Services Subcontractors (AdSS) requirements for Division of Developmental Disabilities (Division) Member Transitions between the AdSS to include:

- Added definitions for Close Proximity and Member Care Transition
- Deleted definition for Medical Equipment and Appliances and Member Contractor Care Transition
- Added changes in subcontractors for when the AdSS identifies and facilitates coordination of care for all Members
- Added a statement where the AdSS shall receive transitioning FFS Member information via automated electronic transfer file accessible through the AHCCCS Secured File Transfer Protocol (SFTP Server)
- Added statement where the AdSS shall develop policies and procedures for medical conditions including pregnant Members who are high risk, Members who are on a high-cost specialty drug or biologic, Members who are being considered for or are actively engaged in a transplant process and for up to one-year post transplant, Members with qualifying CRS conditions, Members enrolled in the ALTCS EPD and DDD or Tribal ALTCS program, and Members who qualified for the SED designation through the SED Eligibility Determination process in the AHCCCS system
- Added a statement where the relinquishing AdSS will utilize AMPM Exhibit 1620-9 used by ALTCS Contractors and the Tribal ALTCS program for Members with special circumstances who are transitioning enrollment to another AdSS
- Added a statement about a coordination plan between child providers and the anticipated adult providers including development of a transition plan for the member that focuses on assisting the Member with gaining the necessary skills and knowledge to become a self-sufficient adult and facilitates a seamless transition from child services to adult services
- Added a statement where the AdSS shall ensure ALTCS eligible Members under age 21 receiving Licensed Health Aide services are engaged in transition planning and communication, if offered to families prior to the Member's 21st birthday.
- Added a statement where the AdSS shall not provide LHA services to Members 21 years and older as specified in AMPM Policy 1240-G and A.A.C. R4-19-90124
- Added a statement where the receiving AdSS shall submit a request for continuation of previously approved transplant reinsurance, as specified in Contract, to AHCCCS Medical Management (MM)
- Added a statement where the AdSS shall cover transportation, and room and board for the transplant

candidate, donor and, if needed, one adult caregiver as identified by the transplant facility

- Added a statement where the AdSS shall ensure Members receiving behavioral health medications from their PCP may simultaneously receive counseling and other medically necessary services
- Added a statement where the AdSS shall ensure if an organization distributes information electronically, it must indicate that the information is available in paper format upon request
- Removed the section on Out of Service Are Placement

#### [Division Medical Policy Manual 980 Performance Improvement Projects](#)

This policy has been updated to reflect updated guidance in use of Performance Improvement Projects. Changes include: Clarified guidance for self-selected and mandated PIPs, addition of health equity considerations for consideration as a unique factor for implementing interventions to improve performance.

#### [AdSS Medical Policy Manual 980 Performance Improvement Projects](#)

This policy has been updated to reflect updated guidance in use of Performance Improvement Projects. Changes include: Clarified guidance for AdSSs on self-selected and mandated PIPs, addition of health equity considerations for consideration as a unique factor for implementing interventions to improve performance.

#### [Division Operations Policy Manual 434 Coordination of Benefits and Third Party Liability](#)

Division Operations 434 Coordination of Benefits and Third Party Liability (Previously Division Operations 4001 Third Party Liability) was revised with the following changes:

- Changes the policy number and title from “Division Operations Manual Policy 4001 Third Party Liability” to “Division Operations Manual Policy 434 Coordination of Benefits and Third Party Liability” for consistency with ACOM 434.
- Adds a purpose and definition section to the policy.
- Updates Third Party Liability requirements to align with current requirements in ACOM 434.
- Updates the document to align with DDD’s policy formatting standards.

#### [Division Operations Policy Manual 449 Behavioral Health Services for Children in Department of Child Safety Custody and Adopted Children](#)

Division Operations Policy 449, Behavioral Health Services for Children in Department of Child Safety Custody and Adopted Children, respectively, have been updated to comply with recent AHCCCS updates to AMPM 449 as follows:

- The term “treatment” changed to “services” throughout the policy.
- Added “county of removal” regarding continuity of services.
- Added definition of “Integrated Rapid Response.” The term is used throughout the policy to include integrating physical assessment to the rapid response.
- Removed definition of “Rapid Response.”
- Added new Behavioral Health Utilization and Timeframe Deliverable.
- Added language to clarify: A request for out-of-home treatment must be determined no later than 72 hours after the request is received. If a request needs to be expedited, the determination must be made in less than 72 hours.
- Updated contact information

## [AdSS Operations Policy Manual 449 Behavioral Health Services for Children in Department of Child Safety Custody and Adopted Children](#)

AdSS Operations Policy 449, Behavioral Health Services for Children in Department of Child Safety Custody and Adopted Children, respectively, have been updated to comply with recent AHCCCS updates to AMPM 449 as follows:

- The term “treatment” changed to “services” throughout the policy.
- Added “county of removal” regarding continuity of services.
- Added definition of “Integrated Rapid Response.” The term is used throughout the policy to include integrating physical assessment to the rapid response.
- Removed definition of “Rapid Response.”
- Added new Behavioral Health Utilization and Timeframe Deliverable.
- Added language to clarify: A request for out-of-home treatment must be determined no later than 72 hours after the request is received. If a request needs to be expedited, the determination must be made in less than 72 hours.
- Updated contact information

## [Division Provider Policy Manual Preface Intended Users of the Provider Policy Manual](#)

The preface has been updated to include the revised name of Chapter 60. Required Notifications, previously Notification to Qualified Vendors.

## [Division Provider Policy Manual Chapter 28 Member Rights](#)

This policy has been updated to provide updated Division Member Rights information, as well as to better clarify Provider responsibilities. Changes include:

- Added definitions and clarified guidance for Division Providers.

## [Division Provider Policy Manual Chapter 60 Required Notifications](#)

This policy has been updated to better align with AHCCCS requirements, as well as to reflect current policy language and formatting standards for better readability.

Description of changes:

- This policy was previously titled “Notifications to Qualified Vendors.” Content changes were minimal, however, provide better readability of expectations for Required Notifications.

## **RETIRED POLICIES**

Division Medical Policy Manual 580 Behavioral Health Referral Process

- This policy is being retired as it has been replaced by the new Division Medical 580 Child and Family Team (published 5/8/2024) and is no longer needed. The same information is contained within other Division Medical Policies.

AdSS Medical Policy Manual 580 Behavioral Health Referral and Intake Process

- This policy is being retired as it has been replaced by the new AdSS Medical 580 Child and Family Team (published 5/8/2024) and is no longer needed. The same information is contained within other Division Medical Policies.

## Division Operations Policy Manual 4001 Third Party Liability

- Division Operations 4001 is being retired as the policy number/name has changed to Division Operations 434 Coordination of Benefits and Third Party Liability (Published 5/8/24) for consistency with ACOM 434.

### **POLICY PUBLIC COMMENT**

The Division is currently accepting public comments regarding Division policies. The policy revisions can be found on the [Policy page](#) of the Division's website. This form, <https://forms.gle/4MGCsdyKTRPJna3m9>, can be used to submit public comments.