



## 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 - 06/24/2022

The DDD Policy Unit published new and revised policies on Friday, June 24, 2022. The policies are available on the Division's [Policy webpage](#).

### NEW POLICIES

#### [Provider Policy Manual Chapter 66 Behavioral Health](#)

This policy has been developed to clarify expected roles and responsibilities for Qualified Vendors (QVs) related to coordinating and supporting the implementation of behavioral health services, as well as to provide additional information regarding the System of Care.

### REVISED POLICIES

#### [Provider Policy Manual Chapter 7 Dental/Oral Health Care](#)

This policy was revised to provide information to Qualified Vendors regarding the provisions of medically necessary dental services for DDD members age 21 and older, as specified in AMPM Policy 310-D1; medically necessary, non-emergency (routine) dental services for DDD Arizona Long Term Care System (ALTCS) members age 21 year and older as specified in AMPM 310-D2; and medically necessary dental services for members under 21 years of age are covered as specified in AMPM policies 430 and 431.

#### [Provider Policy Manual Chapter 59 Benefit Coordination and Fiscal Responsibility for Behavioral Health Services and Physical Health Services](#)

This policy was revised to provide guidance to Qualified Vendors/Providers regarding the limited situations when ALTCS eligible members enrolled with one of the Division's Administrative Services Subcontractors (AdSS) or the Tribal Health Program (THP) has chosen to receive behavioral health services through a Tribal Regional Behavioral Health Authority (TRBHA), and the member is not receiving all of the physical and behavioral health services through one entity.

#### [Provider Policy Manual Chapter 65 Requirements for Qualified Vendors and Providers on Providing Medicaid Services Outside the State](#)

This policy was revised to provide guidance to Qualified Vendors/Providers for providing Medicaid services to members who are ALTCS eligible and are out-of-state, including members who require placement out of state in order to obtain medically necessary services and members who temporarily leave the state and need Medicaid services to support them out of state.

## **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.