

DDD SHOUT

VENDOR & PROVIDER NEWSLETTER

Volume XXVI - November 2021

COVID-19 Update

On October 20, 2021, the Centers for Disease Control and Prevention (CDC) updated its guidelines for COVID-19 vaccine booster shots based on Food and Drug Administration (FDA) recommendations. The CDC now recommends that individuals in the following categories who received both doses of the Pfizer or Moderna vaccine at least 6 months ago receive a booster shot:

- Individuals 65 years and older.
- Individuals 18 years and older who have underlying medical conditions.
- Individuals 18 years and older who work or live in high-risk settings.

The CDC also recommends that ALL individuals over 18 years of age who received a single dose of the Johnson & Johnson vaccine at least 2 months ago receive a booster shot.

The CDC has determined that individuals interested in a COVID-19 booster shot are not required to get the same brand they received for their initial vaccine. Any vaccine booster will have the desired effect of boosting the individual's immune system against COVID-19.

The Food and Drug Administration and the Centers for Disease Control and Prevention have now approved the Pfizer COVID-19 vaccine for children aged 5-11. Children supported by the Department of Child Safety (DCS) will need parents/guardian consent and the DCS caseworker will need to secure a court order before the child may receive the vaccination.

Whether they are getting a booster or their first dose, members or their families can contact their DDD Health Plan for assistance if they need an in-home vaccination or an appointment can be made at a local pharmacy like Walgreens or CVS. A text message with their zip code can also be sent to GETVAX (for English) or VACUNA (for Spanish) to receive a message with three vaccination sites near them, with phone numbers to call to schedule an appointment.

COVID-19 Public Health Emergency (PHE) Extended

During the COVID-19 public health emergency (PHE), DDD has been able to support individuals who receive Medicaid benefits in Arizona through additional flexibilities. Many of these changes were implemented by AHCCCS with approval from the Centers for Medicare and Medicaid Services (CMS). Since the beginning of the PHE, these flexibilities were understood to be temporary and would eventually be unwound.

In May 2021, AHCCCS announced some changes that will end with the conclusion of the public health emergency. These include:

- Reimbursement for parents offering direct care to minor children

- Virtual case management (support coordination) visits for ALTCS members
- Home delivered meals
- Virtual supervisory visits of Direct Care Workers

On October 18, 2021, the United States Department of Health and Human Services extended the public health emergency. **This means the above flexibilities will continue to be available until at least January 2022.**

Sign Language or Oral Interpretive Services

On October 21, 2021, DDD posted an updated rate book to its website that includes the addition of rates for Sign Language or Oral Interpretive Services in alignment with [Division Provider Policy Manual Chapter 26](#).

Qualified Vendors are encouraged to recruit and hire Direct Support Professionals who speak the member's primary language to deliver direct care services. When this is not possible, Qualified Vendors may bill the Division separately for non-prevalent languages (languages other than English/Spanish/Navajo) provided by qualified interpreters employed by an interpreting agency. The need for these services must be identified by the member's planning team and documented in the member's planning document.

The basis of payment for all Sign Language or Oral Interpretive Services is 15-minute increments of direct service time. Direct service time is the period of time spent with the member during the delivery of approved Home and Community Based (HCBS) services. Qualified Vendors can submit claims for member absences where the cancellation occurred within 48 hours of the scheduled appointment. Vendors must maintain documentation for audit review. The new Rate Book and Rate Book Lookup can be found in the Rates section of the [Authorization, Rates and Billing Information](#) section of the website.

Network Operations and Management Reorganization

On Friday, October 15, 2021, DDD implemented the reorganization of its network units as previously communicated. This reorganization moved DDD from a district centric orientation to a statewide model with more specialized functions that provide for clearer Network roles to support Qualified Vendors and providers, reduce duplication of activities, streamline data collection, and improve overall network operations and management. The new Network organizational structure includes a Network Operations Unit and a Management, Oversight, and Development Unit.

The Network Operations Unit:

- Network Administrator - Megan Taylor
 - Residential Team - Residential Services (Statewide)
 - Network Area Manager - Charlette Bishop
 - For general questions about Residential Services DDDResidentialUnit@azdes.gov
 - Provider Network Support Team (e.g. Vendor Relations)
 - Network Area Manager - Jennifer Atkins
 - Assigned to vendors based on vendor name alphabetically to provide technical support to all Qualified Vendors for all service lines. See DDD website for direct contacts.
 - For general inquiries about Vendor/Provider Support ProviderNetworkSupport@azdes.gov
 - Resources Team - Non-Residential Services (Statewide by service)
 - Network Area Manager - Brandy Rowland
 - Network Area Manager - Marla Davidson
 - For all general internal or external communication to District Resources

NetworkDistrictResource@azdes.gov

- For all communication related to HCBS Direct Referral HCBSDirectReferrals@azdes.gov

The Network Management, Oversight, and Development Unit:

- Network Administrator - Minnie Williams
 - Network Monitoring and Oversight Team
 - Network Area Manager - Jason Wesley
 - Network Development and Recruitment Team
 - Network Area Manager - Bill Dobias
 - Workforce Development Team
 - Network Manager - Debra White

For general inquiries and referrals of interested potential qualified vendors who want to contract with the Division networkproviderrecruitment@azdes.gov.

More information is available on the DDD website, <https://bit.ly/dddnetwork>, including a new organizational chart, frequently asked questions, and a list of Network employee contacts. Qualified Vendors and Providers with questions can submit them using this form, <https://forms.gle/w2nvGzmy5kAAxzh26>.

DDD Vendor Information

The [DDD Provider Search](#) is a tool that members and families can use to search for Home and Community Based Service (HCBS) Qualified Vendors online. The tool allows members and families to search for a vendor near them. Vendors are grouped by “service type,” facility-based or in-home/community based. After making that selection, members and families can select a specific service. They can then refine the results based on service area, language availability, vendor name and facility name, or any combination of all the options. This is another way for Vendors to connect to members and family in need of service.

Qualified Vendors are responsible for updating and maintaining this information at the site-specific level. The Division updated [Provider Policy Manual Chapter 47, Managing Vendor Call Lists, Provider Directories and the Scope of Services and Reporting](#) in September 2019 to reflect this requirement and compliance with AHCCCS Contractors Operations Manual (ACOM) 406 – Member Handbook and Provider Directory, which includes requirements for identifying facilities with special accessibility features. It is critical that Qualified Vendors maintain their location listings in CAS to ensure correct information is displayed to members and families searching for a provider. This includes ensuring they have accurate office hours when a member or family could call to ask questions. Incorrect or outdated information may cause your agency to not appear in a member’s search and result in a missed opportunity. Instructions to maintain site information in the Provider Search can be found in the [DDD Vendor Directory Application User Manual](#).

The Division uses Qualified Vendor after-hours phone numbers as well as office phone numbers in the Qualified Vendor Portal (QVP) to implement quality control measures, including testing the responsiveness of Qualified Vendors to after-hours telephone calls. The Qualified Vendor Agreement (QVA) requires Qualified Vendors to keep all contact information up to date in the CAS. Qualified Vendors should review their information monthly or as changes occur.

These updates should be made in CAS to ensure after-hours contact information is up to date. Calls placed to a Qualified Vendor agency’s after-hours telephone number must be returned to the caller within 15 minutes. The calls may be answered by a person or by a recording/answering machine. However, if a recording/answering machine is used for those calls, the recording must direct the caller to a contact number which

will be answered within 15 minutes. For more information on telephone testing of Qualified Vendors, please review [DDD Provider Policy Manual, Chapter 62 - Electronic Visit Verification](#). Additionally, Provider Manual Policy Qualified Vendor Management of Gaps In Critical Services has been rescinded. Qualified Vendors are not required to report gaps in services as previously required by this policy. Instead Vendors must follow the requirements as outlined in [Provider Policy Manual Chapter 62 Electronic Visit Verification](#).

Vendor Mergers, Acquisitions or Material Changes

In order to ensure a timely and smooth transition and to ensure continuity of care to members the Division needs to be notified in advance when a Qualified Vendor is selling or restructuring their business. Per the current Qualified Vendor agreement ([section 6.5.14, Merger or Acquisition](#)) the Qualified Vendor shall not change ownership and/or taxpayer identification number without prior written consent of the Division during the term of the agreement. In addition, a proposed merger, reorganization, affiliation, or change in ownership of the Qualified Vendor shall require prior approval of the Division. In some cases, a new Application may be required. Qualified Vendors must notify their assigned contract specialist in writing sixty (60) days prior to enacting any merger, acquisition or material change to their business operations.

Member Oral Hygiene

Oral hygiene including brushing and flossing teeth are everyday activities that are often afterthoughts for many people as they are assumed to be part of a person's daily routine. For individuals with developmental disabilities, brushing and flossing can be challenging. Proper oral hygiene can prevent bacteria from damaging a person's gums, teeth or even their intestinal tract. Additionally, increased risks from diseases like endocarditis, cardiovascular disease, and pneumonia have been linked to oral health. This [Dental Care Every Day - A Caregivers Guide](#) from the United States Department of Health and Human Services offers excellent suggestions to help caregivers properly assist individuals with their oral hygiene. This document is part of the [Division's Clinical Practice Guidelines](#) and is recommended reading for all family caregivers and Direct Care Workers, but especially for those who provide Attendant Care or Habilitation services in residential settings.

National Core Indicators

[National Core Indicators \(NCI\)](#) is a collaborative effort between the National Association of State Directors of Developmental Disabilities Services (NASDDDS) and the Human Services Research Institute (HSRI). NCI uses a series of [surveys and in-person interviews](#) to measure member satisfaction and efficacy of DDD programs and services. The 2021-2022 National Core Indicator survey cycle will be starting in the coming months. This is an opportunity for members and their families to express their thoughts, feelings, and concerns around the services provided to them by the Division.

During the last cycle, 2020-2021, Arizona did not meet the 400 In-Person Survey interviews requirement to be included in the report for participating states. This year the Division will be asking Support Coordinators to help connect members with their assigned surveyor through Pilot Parents of Southern Arizona and urge participation of members selected. Pilot Parents of Southern Arizona surveyors are graduates of the [Arizona Partners in Leadership Program](#), a program available to any member or family member who would like to participate, provided by an additional partnership/contract between DDD and Pilot Parents of Southern Arizona. Support Coordinators will gather 'Pre-survey' & 'Background Information' from FOCUS or a member's planning team about the members selected to participate. Qualified Vendors are asked to assist Support Coordinators if they are requested to provide information and to help connect selected members with the in-person surveyor.

The three family surveys will be sent to randomly selected members' families beginning in early 2022. Qualified Vendors are asked to encourage the selected families to complete the survey. Families can feel comfortable completing the survey knowing that DDD does not receive information related to individual feedback, only an aggregated report from NCI. The survey responses are not returned to DDD. Questions about National Core Indicator surveys, Arizona survey data, and other state survey reports can be sent to DDD's NCI Coordinator, Michelle Pollard, via email at NCISurveys@azdes.gov.

Deficit Reduction Act (DRA) Audit

Per the Qualified Vendor Agreement Section 6.8.2.14 and as part of a larger audit, the Department of Economic Security, Division of Developmental Disabilities (DDD), Research and Audit Unit (R&A) is reviewing compliance with Section 6032 of the Deficit Reduction Act of 2005.

Only vendors who receive at least \$5 million dollars annually from DDD are subject to this requirement. The Division will contact the vendors directly to provide detailed guidance, due dates, and to collect the necessary documentation. Acceptable policy documentation includes, but is not limited to the following:

Policies that provide detailed information of the following:

- Federal False Claims Act
- Remedies for false claims and statements
- Any state laws pertaining to civil or criminal penalties for false claims and statements
- Whistleblower protections under Federal False Claims Act and state laws
- Role of such laws in preventing and detecting fraud, waste and abuse

Organization compliance program Employee handbook, with specific discussion of:

- State and federal laws referenced above
- Rights of employees to be protected as whistleblowers
- Entity's policies and procedures for detecting fraud, waste, and abuse

If you have any questions or concerns, please reach out to DDD's Post Payment Review Claims & Recovery Unit via email, DDPPR@azdes.gov.

AHCCCS Provider Enrollment Portal (APEP) Re-registration and Re-validation Requested

During the COVID-19 public health emergency (PHE), AHCCCS adjusted the provider screening requirements in order to maintain an active provider directory and ensure members had continuous access to health care services. AHCCCS also launched the new Provider Enrollment Portal, APEP.

After implementing APEP in August 2020, AHCCCS asked providers to "re-register." All active providers were asked to create an account in APEP and confirm the data converted into the new portal is accurate and current. AHCCCS has not terminated providers during the PHE for non-compliance with this re-registration process.

Over the past 15 months, providers have received a written invitation by the US Postal Service that includes a temporary 14-digit application ID and instructions to create a user account to access their file. AHCCCS also transitioned away from paper-based updates, and encouraged providers to submit their updates directly into APEP. For many providers who have not completed the re-registration process, the paper update is being returned with instructions to report the update directly into APEP through the re-registration process.

Re-validation is a process that occurs after initial enrollment in which a provider is subjected to the same screening, disclosures, and as applicable, fingerprint-based criminal background check requirements as a new enrollment. It is during the periodic revalidation, a provider shall verify the accuracy of its enrollment information. This process occurs every four years from the initial date of enrollment or last revalidation approval. During the PHE, no re-validations were completed, however all active providers were asked to re-register.

Although we do not know exactly when the PHE will end, AHCCCS is planning for it now. Once it ends, AHCCCS will begin a review of the approved re-registration applications based on the categorical risk level of the provider in accordance with 42 CFR 455.450. For many providers, their approved re-registration application will serve as their completed revalidation. These providers will not be required to complete an application for another four years. Providers that require additional screening requirements based on their provider type, or providers who have not completed their re-registration application will be expected to complete a revalidation application. **If a provider does not comply with re-validation requirements, AHCCCS will follow the standard process for terminating enrollment for that provider. This means that the Vendor/ provider cant be paid with Medicaid funding for providing HOme and Community Based services (HCBS).**

AHCCCS encourages providers who have received their written invitation but have not completed the re-registration process to do so as soon as possible.

For more information regarding the provider re-registration invitation plan, please visit azahcccs.gov/PlansProviders/APEP/ProviderReRegistrationInvitePlan.

Email questions on the plan to APEPTrainingQuestions@azahcccs.gov.

Community Resources Reminder

The [Department](#) and the [Division](#) have information online for general resources as well as local, state, and national groups that support members and their families. Many of these groups can assist with day to day tasks and other services that may not be covered by the Division. Links and/or contact information is available for organizations specializing in behavioral health & substance abuse, resources for members with Autism, assistance for parents, family members and caregivers, independent living, employment, transportation, respite and more. Share this resource with the members and families you serve who may benefit from resources they may not know are available.

DDD Town Hall Meetings

The Office of Individual and Family Affairs (OIFA) continues to host town hall meetings for members, families and providers. The next town hall meeting will be held on Thursday, January 6, 2022, from 6:00 p.m. to 8:00 p.m.

Please share this information with the members and families you serve and encourage them to participate. The town hall schedule and instructions to join via the Internet or phone can be found at bit.ly/dddtownhall.

Get Caught Up

Did you know the Division posts vendor announcements and editions of the Shout on the web? Get caught up and stay informed on all of the [recent vendor communications](#).

If there are other individuals in your organization who would benefit from receiving DDD Vendor Announcements, please encourage them to sign up at <https://azdes-community.secure.force.com/subscribe/>.

Report Fraud, Waste, Abuse and Misconduct

DDD Program Integrity Unit

- Call 1-877-822-5799
- Send an email to dddfwa@azdes.gov
- Send a letter to:
DES/DDD
Attn: Corporate Compliance Unit
1789 W Jefferson St.
Mail Drop 2HA1
Phoenix, AZ 85007
- Complete the form online at <https://des.az.gov/how-do-i/report-suspected-fraud/developmental-disabilities-fraud-waste-and-abuse>

AHCCCS OIG Fraud Prevention Unit

- Call the Office of the Inspector General at 602-417-4193
- Report online at <https://azahcccs.gov/Fraud/ReportFraud/onlineform.aspx>
- Report provider fraud by calling:
 - Maricopa County: 602-417-4045
 - Outside Maricopa County: 1-888-487-6686
- Report member fraud by calling:
 - Maricopa County: 602-417-4193
 - Outside Maricopa County: 1-888-487-6686
- Submit general questions via email at AHCCCSFraud@azahcccs.gov.