

# DDD SHOUT

## VENDOR & PROVIDER NEWSLETTER

December 2024

### Incident Reporting Process Change Survey

The Division is considering a change in the incident reporting process in which Qualified Vendors directly submit all reportable incidents (per Division Medical Manual 961 and Division Provider Manual Chapter 70) directly into the AHCCCS QM Portal. Please give us feedback about your assessment of how much time your agency needs to implement this change by completing the [AHCCCS QM Portal Direct Entry survey](#) by **January 3, 2025**.

To assist with your assessment, below are links to the AHCCCS QM Portal User Guides which detail the steps required for Qualified Vendors to enter, review, and approve reported incidents within the AHCCCS QM Portal.

- [Incident Accident Death Submit User Guide](#)
- [Incident Accident Death Return User Guide](#)
- [Incident Accident Death Approve User Guide](#)

Qualified Vendors should review the user guides and their current incident reporting processes to assess the timeframe their agency will need to fully transition to directly entering incident reports into the AHCCCS QM Portal.

For questions about this survey please contact [DDD Chief Quality Officer Carl Burik](#).

### Claims Coding Updates

As of October 1, 2024, AHCCCS has updated the coding system and is requiring the use of U4 and U5 modifiers for habilitation and respite services (codes T2107 and S5150). These modifiers are members receiving paid services from a family member. Previously these codes were limited to attendant care.

**Vendors will be required to use these modifiers starting February 1, 2025 for any dates of service after October 1, 2024 for any previously unbilled services.** Vendors are not required to modify paid claims if paid before February 1, 2025. Vendors can start using the modifiers prior to February if desired, since the WellSky system is updated.

### Guidelines for Filing a Claims Dispute

[Division Operations Policy Manual Chapter 6000-K Claims Disputes](#) states: "...The claim dispute must be filed within 12 months from the ending date(s) of service, within 12 months of the date the member's eligibility is posted, within 12 months from the date of discharge from a hospital, or within 60 days after the date of the denial of a timely claim submission," whichever is latest. Claim disputes must be filed in writing and include the following factual information:

- PROVIDER AHCCCS ID

- PROVIDER NAME
- PROVIDER TIN/SSN
- WELLSKY CLAIM ID
- MEMBER AHCCCS ID
- MEMBER FIRST NAME
- MEMBER LAST NAME
- HCPCS CODE/CPT Code
- DDD SERVICE
- START DOS
- END DOS
- TOTAL UNITS
- TOTAL AMOUNT BILLED
- Supporting information for reason/s the claim should be paid

DDD's Office of Administrative Review will deny a claim dispute if the factual information is not included. Claim disputes must be filed in writing and specify in detail the factual and legal basis for the claim dispute and the relief requested. Documentation MUST be completed in Excel on the [Claims Grievance Log](#). Supporting documentation should not be included for members not listed on the claim dispute letter.

Qualified Vendors with a billing inquiry should check the [GAO website](#) or their Billing Detail Report in [FOCUS](#). Additional questions can be emailed to [DDD Provider Relations](#). They can also be contacted by phone at 1-844-770-9500 option 1, TTY/TDD 711.

## **Rate Book Effective January 1, 2025**

The rate book for January 1, 2025 has been published. The rate book contains updates related to the following items:

- Updated Incentive Funding qualifications for Behavioral-Supported Group Homes.
- Updated approval process for enhanced transportation rates.
- Added Preventing Abuse, Neglect, and Exploitation Training reimbursement and process.
- Updated Services to align with RFQVA DDD-2024
  - Added rates for Pathways to Employment (PTW).
  - Removed rates for Transition to Employment (TTE) and Career Preparation and Readiness (CPR).
  - Changed service name "Individually Designed Living Arrangement" to "Supported Living".
  - Changed service names for Day Treatment and Training, Adult (DTA) and Day Treatment and Training, Children (After School) (DTT) to Day Services, Adult (DTA) and Day Services, Child (DTT).
  - Removed rates for Day Treatment and Training, Children (Summer) (DTS).
- Removed the following services the Division is no longer contracting for.
  - Habilitation, Consultation Licensed Psychologist BCBA-D (HCM)
  - Habilitation, Consultation Licensed Behavior Analyst (HCM)
  - Habilitation, Consultation Board Certified Behavior Analyst (HCM)
  - Habilitation, Consultation Bachelors Level (HCB)
  - Habilitation, Consultation Assessment & Planning (HCA)
  - Habilitation, Early Childhood Autism Specialized(ECM)

# Behavior Support Manual Updates - Chapter 200 Prohibited and Restricted Techniques

The updated [DDD Behavior Support Manual](#) went into effect on August 28, 2024. This month's update will focus on Restricted or yellow light techniques.

Service providers shall only use the following Restricted techniques when they are **part of an approved behavior plan** and **only in the manner approved within the PRC-approved behavior plan**.

- Forced compliance- when used as a procedure or technique in which a member is physically forced to follow a direction or a command, or through a lack of choice.
- Response Cost- sometimes associated with token economies, designed to decrease Inappropriate Behaviors in which reinforcers, items, or activities that a Member has already earned are removed as a part of a Behavior Plan strategy
- Restitution- as an act of paying or compensating for property loss or damage in order to learn alternative behaviors
- Psychotropic Medications when used for the purpose of modifying behavior, and the member resides in a DDD-licensed setting.
- Restricting a Member's Rights. Examples of Rights Restrictions include limitations to privacy (door alarms, electronic tracking), limitations to movement (Protective Devices designed to reduce the likelihood of injury from self-injurious behavior), or limitations to access (residence, mail, personal possessions, food/drink, activities, family, friends, and children).
- Protective Devices to reduce self-injurious behavior (SIB) - that are designed, and prescribed to reduce the likelihood of injury from SIB (e.g. helmets, gloves, arm pads)
- Global Positioning System (GPS) or other Electronic Tracking Devices, when used as a safety device to locate a Member with a documented history of elopement, disorientation, or being lost in the community.

Qualified Vendors should read the policy in detail to learn about the specific requirements for using Restricted Techniques in a behavior plan.

Qualified Vendors with questions about the Behavior Support Manual or who would like to request technical assistance regarding a behavior plan, should contact the [DDD PRC Administration](#).

For Technical Assistance on plan submission requirements, contact the district PRC team for assistance. See links [PRC District Chair](#) or the [Administrative Assistants](#).

Are you looking to get more involved in the Developmental Disabilities Community? We need YOU! The DES Division of Developmental Disabilities (DDD) is looking for volunteers to serve on the Program Review Committees (PRC) and the Independent Oversight Committees (IOC). DDD has five districts throughout the state. Each district has an IOC and PRC that meet virtually. These committees review behavioral plans and incident reports to ensure the protection of member's rights, prevention of abuse, neglect, and exploitation, and that best practices are being followed. If you'd like to learn more, contact the DDD Volunteer Team at [DDDVolunteers@azdes.gov](mailto:DDDVolunteers@azdes.gov), or fill out the [Express Interest Form](#).

## SMART Goals and Outcomes

The Division is seeking accreditation from the National Committee for Quality Assurance (NCQA) Case Management for Long Term Services and Supports (CM-LTSS). One outcome of this work has been the creation of detailed instructions for Support Coordinators to use when creating SMART Goals and outcomes

for members as part of the person-centered service planning process. SMART is an acronym for goals that are Specific, Measurable, Achievable, Relevant, and Time-bound. The Division has created a practice guideline specific to SMART goals and outcomes. Over the next few editions of the Shout, the Division will share parts of the document with Qualified Vendors so they have an understanding of what the goals and outcomes should look like when the Support Coordinator writes them. This month is focused on understanding what a goal and an outcome are.

### What is a goal?

A goal is an aspirational statement about what a person wants to achieve in their life. Goal setting acts as a roadmap for the person to follow in achieving things in life that are important to them. It is not an activity to reach an achievement but rather the picture of what success looks like for the person when the goal is met.

### What is an outcome?

An outcome is the steps completed to reach a desired life goal. Due to the person's baseline, one or more outcomes could be attached to a single goal to achieve success. The outcome is supported through action items, which are the building blocks that will be completed by the person and other identified team members.

Goals and outcomes should:

- Be written in the person's words using a SMART methodology.
- Keep a single focus for each goal not a list of things.
- Proceed in a logical order when there are multiple outcomes for one goal.
- Keep relevant connections between the goals and outcomes.
- Be set by the person based on their own life goals and not be dependent on services.
- Celebrate every success.
- Encourage physical tracking of the outcomes and actions so progress is easily identified.
- Encourage having the goals accessible for the person so they can look at them regularly.
- Be re-evaluated and adjusted as appropriate.

Next month, more information about the SMART methodology will be shared.

## **Developmental Home Qualified Vendors**

### Criminal History Self Disclosure (CHSD) Form LCR-1034A

The Office of Licensing Certification and Regulation (OLCR) requires a Criminal History Self Disclosure (CHSD) for all Developmental Home providers every three years. This is a six-page form that must be notarized. OLCR requires that all six pages be completed. To be accepted:

- The first page must have the provider's full name, date of birth, and full address;
- The first page must have both questions answered;
- The first page must be notarized with the date matching the date the provider signed it;
- All following pages must have each question answered individually.

Beginning January 1, 2025, OLCR will no longer accept forms that are not completed appropriately. An inaccurate form will be returned and a new one will be required. Additionally, OLCR will no longer accept altered forms once they have been notarized.

## Adult Developmental Home Agreement Form DDD-281 & Child Developmental Home Agreement Form DDD-289 Still Required

RFQVA DDD-2024 will be effective January 1, 2025, which requires a Developmental Home Subcontract (Exhibit BB) between the Qualified Vendor and each licensee/ Developmental Home provider instead of the previous requirement for a Developmental Home Third Party Agreement. OLCR will no longer require the Developmental Home Third Party Agreement to be discussed in the Quick Connect Home Study. However, [DDD-281](#) & [DDD-289](#) remain in effect and must be reviewed and signed by the Developmental Home provider before the initial and renewal applications. The Qualified Vendor is required to review this form with the applicant and ensure it is understood and accepted. This needs to be documented on Screen 47 in Quick Connect.

Qualified Vendors with questions should contact the [Office of Licensing, Certification, and Regulation](#).

### National Core Indicators Survey Update

The Division's National Core Indicator-IDD [NCI-IDD] Surveys vendor, Vital Research, LLC is in the process of contacting members, families, vendors, and Support Coordinators to schedule 2024-2025 In-Person Survey (IPS) interviews. Surveying will start in January 2025. Vital Research will send IPS notifications to schedule survey interviews and reminders to members and families of their scheduled survey interview appointments.

The Family Guardian Survey (FGS), Adult Family Survey (AFS), and Child Family Survey (CFS) are available to complete online or on paper. Vital Research will mail paper surveys to families with steps to complete the survey online and a postage-paid envelope.

Survey	Notification letter (with online survey link)	Mail survey
AFS	Mailed the week of 12/9	Mail the week of 12/30
CFS	Mailed the week of 12/9	Mail the week of 12/30
FGS	Mailed the week of 12/16	Mail the week of 1/13

Note: All Family Surveys are only for the member identified on the cover letter included with the survey.

Each online survey is anonymous and comes with your survey code for the website. All paper responses will be mailed to Vital Research, LLC to be entered into the ODESA (Online Data Entry Survey Application) system.

#### Completed Family Survey Return Address

Vital Research, LLC  
6300 Wilshire Blvd, Suite 860  
Los Angeles, CA 90099

Vital Research will send notifications and reminders for the Adult Family, Child Family, and Family Guardian Surveys. They have also created an [Arizona NCI Project website](#) for members, families, and providers.

[HSRI developed a video](#) to explain some key details about the In-Person survey. The video explains the purpose of the NCI survey, the rights and risks of participation, how we protect privacy, and how we use the data from the survey.

## Report Fraud, Waste, Abuse and Misconduct

### Report to DDD:

- Call DDD at 1-877-822-5799
- Send an email to [dddfwa@azdes.gov](mailto:dddfwa@azdes.gov)
- Send a letter to DES/DDD
- Attn: Corporate Compliance Unit  
1789 W Jefferson St.  
Mail Drop 2HA1  
Phoenix, AZ 85007
- Complete this [online form](#).

### Report to AHCCCS

- Provider Fraud
  - In Arizona: 602-417-4045
  - Outside Arizona: 1-888-ITS-NOT-OK (1-888-487-6686)
- Report Member Fraud:
  - In Arizona: 602-417-4193
  - Outside Arizona: 1-888-ITS-NOT-OK (1-888-487-6686)
- If you have questions about AHCCCS fraud, abuse of the program, or abuse of a member, email the AHCCCS Office of Inspector General (OIG) at [AHCCCSFraud@azahcccs.gov](mailto:AHCCCSFraud@azahcccs.gov).