

Division of Developmental Disabilities

POLICY NOTIFICATION

Early Notification Transmittal Date: Dec 8, 2025

Public Comment Transmittal Date: Jan 8, 2026

NOTIFICATION

DDD is proposing *changes to the following policy* :

AdSS Medical Manual, Policy 310-R Nursing Facility Services

Description of changes : AdSS Medical 310-R Nursing Facility Services was developed to align with AMPM 310-R.

Revisions include:

- Updated Purpose Statement.
- Updated Definitions Section.
- Formatting changes to align with current standards.

PUBLIC COMMENT TIMELINE

Dates: Public comment will be open for 30 days beginning January 8, 2026 and closing February 7, 2026, 11:59 pm, Arizona time.

Instructions: (Complete instructions are located on the Division's [webpage](#))

- Comments may be submitted online by clicking [here](#).
- Do not include any information that is confidential, covered under HIPAA, or inappropriate for public disclosure.

If access to the online form is not available or if you have questions, please email the DDD Policy Unit at DDDpolicy@azdes.gov.

310-R NURSING FACILITY SERVICES

REVISION DATE: XX/XX/XXXX

REVIEW DATES: 1/14/2025, 11/6/2023

EFFECTIVE DATE: October 1, 2019

REFERENCES: A.A.C. R9-22 Article 2; A.A.C. R9-28 Article 2; AMPM 310-R

PURPOSE

This policy establishes requirements for the Division of Developmental Disabilities' (Division) Administrative Services Subcontractors (AdSS) to cover medically necessary services provided in Nursing Facilities (NF) for Arizona Long Term Care System (ALTCS) Members and for Members who have not been determined eligible for ALTCS that need nursing care 24 hours a day, but do not require hospital care under the daily direction of a physician.

~~This policy applies to the Division's Administrative Services Subcontractors (AdSS). The Division of Developmental Disabilities (Division) covers medically necessary services rehabilitative services provided in Nursing Facilities (NF) for members who are eligible for Arizona Long Term Care System (ALTCS) with acute medical needs and who need nursing care 24 hours a day but who do not require hospital care under the daily direction of~~

~~a physician. NF service providers must be state licensed and Medicare certified. Religious nonmedical health care institutions are exempt from licensure or certification requirements. Prior to a denial of NF services, the AdSS must contact the Division for a second level review.~~

DEFINITIONS

1. "Arizona Long Term Care System" or "ALTCS" means an Arizona Health Care Cost Containment System (AHCCCS) program which delivers long-term, acute, behavioral health and Case Management services as authorized by A.R.S. § 36-2931 et seq., to eligible Members who are either elderly and/or have physical disabilities (E/PD), and to members with Developmental Disabilities (DD), through contractual agreements and other arrangements.
2. "ALTCS Transitional Program" means a program available for eligible ALTCS Members who, at the time of medical reassessment, have improved either medically, functionally, or both, to the extent that they no longer need institutional care, but who still need significant Long-Term Services and Supports

(LTSS). The eligible Member will continue to require some LTSS, but at a lower level of care. The ALTCS Transitional program allows those Members who meet the lower level of care, as determined by the Pre-Admission Screening (PAS), to continue to receive all ALTCS covered services that are medically necessary, as specified in 9 A.A.C. 28, Article 3.

3. “Contract Year” means October 1 through September 30.
4. “Home and Community Based Services” or “HCBS” means as defined in A.R.S. § 36-2939, services that may be provided in a Member’s home, at an alternative residential setting as prescribed in A.R.S. § 36-591 or at other behavioral health alternative residential facilities licensed by the Arizona Department of Health Services and approved by the director of AHCCCS.
5. “Member” means the same as “Client”, a person receiving developmental disabilities services from the Division, as specified in A.R.S. § 36-551.

6. “Nursing Facility” or “NF” means, as defined in 42 § U.S.C. 1396r(a), an institution or a distinct part of an institution which:
- a. Is primarily engaged in providing to residents:
 - i. Skilled nursing care and related services for residents who require medical or nursing care;
 - ii. Rehabilitation services for the rehabilitation of injured, disabled, or sick individuals; or
 - iii. On a regular basis, health-related care, and services to individuals who, because of their mental or physical condition, require care and services above the level of room and board which can be made available to them only through institutional facilities;
and
 - iv. Is not primarily for the care and treatment of mental diseases.
 - b. Has in effect a transfer agreement meeting the requirements of 42 § U.S.C. 1861(l) with one or more

hospitals having agreements in effect under section 1866;

and

- c. Meets the requirements for a Nursing Facility (NF)
described in (a)(ii-iv) of this definition.

7. “Responsible Person” means an adult with a developmental
disability who is a Member or an applicant for whom no guardian
has been appointed, the parent or guardian of a minor with a
developmental disability, or the guardian of an adult with a
developmental disability.
8. “Support Coordinator” means the same as “Case Manager” under
A.R.S. § 36-551.

See Chapter 1210 of this manual regarding Institutional Services for
members who are ALTCS eligible:

The Division covers services for members who have acute medical needs and
are eligible for ALTCS. The following requirements apply:

POLICY

A. GENERAL REQUIREMENTS

1. The AdSS shall require Nursing Facility (NF) service providers to be State licensed and Medicare certified.
2. The AdSS shall not require religious nonmedical healthcare institutions to be State licensed or Medicare certified.
3. The AdSS shall require unlicensed NFs on tribal land to meet State licensure requirements.
4. The AdSS, in lieu of NF services, may, when appropriate, work with the Division:
 - a. To assess for an alternative Home and Community Based Services (HCBS) setting; or
 - b. To provide HCBS in the Member's home.
5. The AdSS may be required to conduct a clinical staffing with the Division prior to denial of NF services, if appropriate, to discuss discharge planning and level of care.

B. NURSING FACILITY SERVICES FOR ALTCS MEMBERS

1. The AdSS shall cover up to 90 days of acute NF services per Contract Year for ALTCS Members as specified in A.R.S. § 36-2939 when the following criteria apply:

~~Aa.~~ The medical condition of the ~~M~~member ~~must be~~ is such that if NF services are not provided, hospitalization of the individual will result; or

~~b.~~ The ~~the~~ treatment is such that it cannot be administered safely in a less restrictive setting, ~~(i.e., home with home health services)~~.

~~While convalescent care should be considered short term, the Contractor shall extend NF coverage as medically necessary.~~

~~The AdSS must contact the Division by Day 45 of the member's placement to discuss long term placement alternatives and coordinate discharge planning with the Division. Prior to consideration of long term NF placement as outlined in Chapter 1210 of this manual, the AdSS must obtain approval from the Division.~~

~~c.~~ The 90 days of coverage is per Member, per Contract Year, and does not begin again if the Member transfers to a different NF.

- d. A new 90-day coverage period begins if a Member resides in a NF at the beginning of a new Contract Year.
 - e. Unused days do not carry over.
 - f. The 90 days of coverage begins on the day of admission regardless of whether a Member is insured by a third party insurance carrier, including Medicare.
- 2. The AdSS shall, prior to the 45th day of the Member's stay at the NF, contact the Support Coordinator to discuss long term placement alternatives and to coordinate discharge planning, if the Member residing in an NF is approaching a cumulative total of 45 NF days during that Contract Year.
 - 3. The AdSS shall place any Member who is ready to be discharged before the 45th day of their stay on the NF on the bi-weekly health plan discharge meeting tracker no later than day 45.
 - 4. The AdSS shall provide the following information in the email notification to the Support Coordinator regarding the Member's approaching 45th day of residing in an NF:
 - a. Member name;

- b. AHCCCS ID;
 - c. Date of birth;
 - d. Name of facility;
 - e. Admission date to the facility; and
 - f. Date the Member will exhaust 90 nursing facility days for the current Contract Year.
5. The AdSS shall obtain approval from the Division prior to considering long term or custodial NF placement for the Member.
6. The AdSS shall cover acute and custodial NF placement during the time the Member is enrolled with the AdSS.
7. The AdSS shall require the NF to coordinate with the Member or Responsible Person on alternative methods of payment for continuation of services beyond the 90 days covered by the AdSS until the beginning of the new Contract Year if the Member is determined to be ineligible for ALTCS enrollment.
8. The AdSS shall notify the Support Coordinator if a Member enrolled in the ALTCS Transitional Program is expected to require

a NF placement for more than 90 days based on their health status.

~~B. For members enrolled in the ALTCS Transitional Program whose health status indicates that the member will likely require NF placement for longer than 90 days, the AdSS shall provide notification to the Division's assigned Support Coordinator. The Support Coordinator shall notify AHCCCS for consideration of continued enrollment in the Transitional Program or a change to ALTCS status.~~

9. The AdSS shall contact the Division for verification of Contract dates and any discussion needed regarding the Member's stay at a NF.

C. SCOPE OF SERVICES

~~Services that are not covered separately when provided in an NF include:~~

The AdSS shall cover the following per diem services provided in the NF, as specified in A.R.S. § 36-2939:

aA. Nursing services, including:

i±. Administration of medication;

- ii2. Tube feedings;
 - iii3. Personal care services, including assistance with bathing and grooming;
 - iv4. Routine testing of vital signs; and
 - v. Blood glucose monitoring;
 - vi5. Assistance with eating; and
 - vii6. Maintenance of catheters.
- bB. Basic patient care equipment and sickroom supplies, including: such as
- i. Bedpans; and
 - ii. Urinals; and
 - iii. D diapers; and
 - iv. Bathing and grooming supplies; and
 - v. Walkers; and
 - vi. Wound dressings or bandages.
- cC. Dietary services including; but not limited to,
- i. Preparation and administration of special diets; and

- ii. Aadaptive tools for eating.
- dD. Administrative physician visits made solely for meeting state certification requirements.
- eE. Non-customized durable equipment and supplies, including: such as
 - i. Mmanual wheelchairs;
 - ii. Geriatric chairs; and
 - iii. Bedside commodes.
- fF. Rehabilitation therapies ordered as a maintenance regimen.
- gG. NF operations to include:
 - i. Aadministration;
 - ii. Medical director services;
 - iii. Plant operations; and
 - iv. Capital.
- hH. Over-the-counter medications and laxatives;
- iI. Social activity, recreational, and spiritual services;

- j. Any other services, to include supplies or equipment that are state or county regulatory requirements or are included in the NF's room and board charge.

C. ACUTE BEHAVIORAL HEALTH SITUATIONS

1. The AdSS shall require the NF to provide prompt notification to the AdSS of changes in Member behaviors or Member acuity if a Member residing within a non-behavioral health unit presents with behaviors that may be a danger to self or others.
2. The AdSS shall coordinate with the NF to verify processes are in place to ensure the Member is safe and is able to remain in the NF while behaviors are occurring.
3. The AdSS shall require the NF to use outside resources when necessary for a Member's behavioral health, including:
 - a. Contacting the 24-hour crisis hot-line;
 - b. Contacting the Tribal Regional Behavioral Health Authority (TRBHA) for coordination of behavioral health needs for all TRBHA-enrolled Members;

- c. Contacting the identified behavioral health provider if the Member is presently receiving behavioral health services;
 - d. Contacting the AdSS if the Member is not currently receiving behavioral health services;
 - e. Obtaining a copy of an existing crisis plan or, in conjunction with an identified behavioral health provider, develop a crisis plan as applicable and as specified in AMPM Policy 320-O;
 - f. Involving the primary care provider (PCP);
 - g. Having the services of a specialist;
 - i. Having the services of a one-to-one monitoring process;
and
 - j. Making changes to the Member's environment to include:
 - i. Change in roommates; or
 - ii. A temporary move to a private room.
4. The AdSS shall require the NF to provide additional supports and services that help the Member to remain in their current environment

and avoid moving to an alternative setting, while ensuring the safety of the Member, staff, and other residents.

SUPPLEMENTAL INFORMATION

- A.** Refer to Division Medical Policy 1210 for requirements regarding institutional services for Members who are ALTCS eligible.
- B.** For Member cost sharing with third party insurance carriers, including Medicare, refer to ACOM 201.
- C.** Additional information related to crisis safety planning is specified in AMPM Policy 320-O.

Signature of Signature of Chief Medical Officer

Name

Date