

Division of Developmental Disabilities

POLICY REVISION HISTORY

Administrative Services Subcontractors (AdSS) Medical Policy Manual

November 13, 2024

October 9, 2024

September 11, 2024

August 28, 2024



Division of Developmental Disabilities

POLICY REVISION HISTORY

Administrative Services Subcontractors (AdSS) Medical Policy Manual

August 7, 2024	August 16, 2023	May 11, 2022
July 31, 2024	August 9, 2023	May 4, 2022
July 10, 2024	August 2, 2023	April 20, 2022
July 3, 2024	June 7, 2023	April 6, 2022
June 26, 2024	May 17, 2023	March 9, 2022
June 19, 2024	May 10, 2023	October 1, 2021
June 12, 2024	May 3, 2023	September 22, 2021
June 5, 2024	April 26, 2023	August 4, 2021
May 29, 2024	April 21, 2023	July 14, 2021
May 22, 2024	March 1, 2023	June 16, 2021
May 8, 2024	February 22, 2023	May 24, 2021
May 1, 2024	January 25, 2023	March 24, 2021
April 17, 2024	December 21, 2022	March 17, 2021
April 10, 2024	December 7, 2022	March 3, 2021
March 27, 2024	November 9, 2022	January 27, 2021
February 28, 2024	October 26, 2022	December 31, 2020
February 7, 2024	September 21, 2022	December 23, 2020
January 24, 2024	July 20, 2022	October 28, 2020
January 17, 2024	July 13, 2022	September 30, 2020
January 10, 2024	July 6, 2022	September 2, 2020
January 3, 2024	June 29, 2022	July 29, 2020
December 13, 2023	June 22, 2022	April 22, 2020
October 25, 2023	June 15, 2022	January 15, 2020
October 11, 2023	June 8, 2022	December 4, 2019
September 6, 2023	May 25, 2022	October 1, 2019
August 30, 2023	May 18, 2022	September 4, 2019

Date: November 13, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

1010 Medical Management Administrative Requirements

Updates/or Summary:

AdSS Medical Policy 1010 Medical Management Administrative Requirements was revised with the following changes:

- Updates the definitions section of the policy.
- Updates the AdSS's requirements for the Medical Management Program Plan.
- Updates the document to align with DDD's policy formatting standards.

Date: October 9, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policies:

582 Support and Rehabilitation Services for Children, Youth, and Young Adults Updates/or Summary:

This policy has been developed to meet Division and AHCCCS requirements, and establishes the expectations for implementation of Support and Rehabilitation Services as they are utilized in the Children's System of Care and incorporates pertinent information from AdSS Medical Policy 230, Support and Rehabilitation Services for Children, Adolescents and Young Adults, which will be retired as of the effective date of this policy.

585 Unique Needs of Children, Youth, and Families Involved with Department of Child Safety

Updates/or Summary:

This policy was developed to meet Division and AHCCCS requirements, and incorporates pertinent information from AHCCCS Behavioral Health Practice Tool 260. The policy is intended to provide an understanding of the unique needs of children involved with the Department of Child Safety and to provide guidance to Child and Family Teams responding to those needs by outlining the clinical considerations for serving children involved with DCS, their families, and other caregivers.

586 Children's Out-of-Home Services

Updates/or Summary:

This policy has been developed to meet Division and AHCCCS requirements, and incorporates pertinent information from AHCCCS Behavioral Health Practice Tool 270. The policy operationalizes the use of Child and Family Team Practice to ensure that treatment interventions for children and youth receiving out-of-home services are consistent with the Arizona Vision and the 12 Principles for Children's Service Delivery.

Retired Policies:

230 Support and Rehabilitation Services for Children, Adolescents, and Young Adults Updates/or Summary:

This policy is being retired as information has been incorporated into the new AdSS Medical 582.

Date: September 11, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policies:

310-F Emergency Medical Services

Updates/or Summary:

New AdSS Medical Policy 310-F Emergency Medical Services has been developed to provide guidance for the Division's AdSSs in the provision of Emergency Services, in particular, education for Members on the appropriate use of Emergency Department services.

Revised Policies:

310-V Prescription Medication Pharmacy Services

Updates/or Summary:

- This policy was revised to align with recent updates to AMPM 310-V.
- The definition for "Medication Error" was added.
- The information about Naloxone was changed from being a prescription medication to an over the counter medication.

431 Dental/Oral Health Services for EPSDT Eligible Members Updates/or Summary:

Division Medical Policy Manual - 400 Maternal and Child Health

This policy has been revised to establish the AdSS requirements for dental/oral health care for Members under 21 years of age who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services to include:

- Changed anxiolysis sedation to anxiolytic sedation
- Added Dental Appliances as a covered EPSDT dental/oral health service
- Added a requirement for the AdSS to provide a constant point-of-contact for Providers and the Division when contacting the plan regarding dental related issues. The point-of-contact shall be employed by the AdSS and responsibilities shall not be delegated to the AdSS' dental subcontractor.

Date: August 28, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policies:

310-X Rehabilitative or Restorative Occupational Therapy, Physical Therapy, and Speech Pathology Services

Updates/or Summary:

AdSS Medical Policy 310-X Habilitative or Developmental Occupational Therapy, Physical Therapy, and Speech Pathology Services was revised with the following changes:

- A new AdSS 310-X was developed to be consistent with Division Medical 310-X and AMPM 310-X.
- Outlines AdSS requirements for coverage of rehabilitative or restorative occupational, physical, and speech pathology services.

Revised Policies:

570 Behavioral Health Provider Case Management

Updates/or Summary:

This policy has been revised and reorganized to align with recent updates to Division Medical Policy 570 and AHCCCS AMPM Policy 570 including:

- Definitions for types of provider case management intensity were removed from the Definitions Section and incorporated as policy language within the policy.
- The term "crisis and safety plan" changed to "safety plan" throughout the policy.
- Contact with a member within "24 hours" of discharge from a crisis setting changed to within "72 hours" of discharge from a crisis setting.
- "Housing Services" and "Social Determinants of Health" were added to help clarify case management activities.
- Language added in Section D., "The Division Behavioral Health Administration shall monitor the AHCCCS QM Portal for notifications and monthly progress reports for out-of-state placement for behavioral health treatment."
- Language added regarding completion of the special assistance assessment and entering the assessment into the medical record.
- Language added regarding coordinating additional supports and services to accommodate member needs during and after a crisis event.
- Clarifying language added with respect to expectations of members receiving contact information regarding On-Call 24/7 availability of services and how to access the crisis system and other natural supports to respond to member crisis.
- Clarifying language added regarding the contractor's duty to ensure providers meet caseload ratios.

Date: August 7, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

450 Out-of-State Placement for Behavioral Health Treatment

Updates/or Summary:

This policy has been revised with the following:

- Minimal revisions made to this policy in preparation for the Operational Review.
- Minor updates to definitions.
- Language added in Section D, "The Division Behavioral Health Administration shall monitor the AHCCCS QM Portal for notifications and monthly progress reports for out-of-state placement for behavioral health treatment."

Date: July 31, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

910 Quality Management and Performance Improvement Program Scope Updates/or Summary:

This policy has been revised to:

- Establish the requirements regarding the scope, administration, management, and implementation of the Quality Management and Performance Improvement (QM/PI) Program.
- Set forth roles and responsibilities of the Division to provide oversight and ongoing Evaluation of the Administrative Services Subcontractors' (AdSS) compliance with QM/PI Program requirements.
- Add new provisions, removed unnecessary provisions, and updated existing language throughout the policy to align with AMPM 910.
- Update language, formatting, and style throughout the policy to align with the Division's Policy Format Manual.

Date: July 10, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policies:

583 Family Involvement in the Children's Behavioral Health System Updates/or Summary:

This policy was developed to align with the new Division Medical Policy 583. The policy sets forth evidenced-based best practices regarding family involvement in the children's behavioral health system.

584 Youth Involvement in the Children's Behavioral Health System Updates/or Summary:

This policy was developed to align with the new Division Medical Policy 584. The policy sets forth evidenced-based best practices regarding youth involvement in the children's behavioral health system.

Revised Policies:

410 Maternity Care Services

Updates/or Summary:

This policy has been revised to establish the Administrative Services Subcontractors (AdSS) requirements for providing Maternity Care Services to Division of Developmental Disabilities (Division) Members to include:

- Added a definition for Controlled Substances Prescription Monitoring Program, Early and Periodic Screening, Diagnostic, and Treatment, Prior Authorization, and Substance Use Disorder.
- Deleted references to ACOG
- Changed Postpartum Depression to Perinatal mood and anxiety disorders
- Changed to gender neutral titles
- Added Vaccines for Children program under support resources and programs
- Added statement for Maternity Care Providers education Members on warning signs of complications of pregnancy and Postpartum, including when to contact the Provider for
- Added the statement where Maternity Care Providers are aware of and encouraged to use the Arizona Perinatal Psychiatry Access Line (A-PAL) when questions surrounding mental health or substance use treatment, including medication management, arise under demonstration of an established process
- Added a statement and examples where the process to address the following SUD treatment, referral, and follow-up specific to maternity Members, per ACOG guidelines
- Added a statement to reimburse provider claims for Global Obstetrical (OB) codes if billed in accordance with the requirements outlined in the AHCCCS Fee-for-Service Provider Billing Manual.

- Added a statement for a plan of action being submitted to the AHCCCS Chief Medical Officer or designee for Tribal Health Program Members, or the contractor Medical Director or designee for Members enrolled with an AHCCCS contractor. Added criteria LM's are responsible for upon delivery of a newborn

Date: July 3, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

961 Incident, Accident, and Death Reporting

Updates/or Summary:

This policy has been revised to:

- Establish the Incident, Accident, and Death reporting requirements for the Division of Developmental Disabilities' (Division) Administrative Services Subcontractors (AdSS) in a consistent manner across the delivery system.
- Add new definitions.
- Add new provisions, remove unnecessary provisions, and update existing language throughout the policy to align with AMPM 961.
- Update language, formatting, and style throughout the policy to align with the Division's Policy Format Manual.

Date: June 26, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

920 Quality Management and Performance Improvement Program Administrative Requirements

Updates/or Summary:

This policy has been revised to apply to the Division's Administrative Services Subcontractors (AdSS) and specifies the Quality Management and Performance Improvement (QM/PI) Program administrative requirements to include:

- Deleted the definition for Assess or Evaluate, Outcomes, and Quality of Care
- Added a policy statement requiring the AdSS to ensure a completed QM/PI Program Plan Checklist and QM/PI Program Plan Attestation is accompanied by the submission of the written QM/PI Program Plan.
- Added a policy statement requiring the AdSS to incorporate monitoring and evaluation activities for the services and services sites specified in the AHCCCS QM/PI Program Plan Checklist.
- Added a policy statement requiring the AdSS to include the AHCCCS Performance Measure Monitoring Report & Work Plan/Work Plan Evaluation Template and AHCCCS Performance Measure Monitoring Report & Work Plan/Work Plan Evaluation Attachment.
- Added a policy statement requiring the QM/PI Program Plan attestation that indicates
 whether there were changes in the AdSS QM/PI Program scope from the previous year, the
 applicable populations for the QM/PI Program Plan being submitted, and confirmation of
 whether the AdSS QM/PI Program Plan and any applicable updates related to changes in the
 QM/PI Program scope have been reviewed by the governing or policy making body prior to
 submission to AHCCCS.
- Added a policy statement requiring the QM/PI Program Plan include a clear outline of which
 lines of business or populations each activity applies to, and activities intended to meet the
 unique needs of each line of business or population for which it serves when the AdSS holds
 a contract for multiple lines of business or population.
- Added a policy statement requiring the QM/PI Program Work Plan that specifies the line of business or population being reported and contains detailed, written set of specific measurable goals and objectives related to clinical and non-clinical care areas that are utilized to determine if the QM/PI Program meets or exceeds established goals and complies with QM/PI requirements in contract and AMPM Chapter 900.
- Added a policy statement requiring Engaging Members Through Technology (EMTT) –
 Executive Summary that specifies the strategic plan for the upcoming calendar year to
 engage and educate its membership, as well as improve access to care and services, through
 telehealth services and web-based applications.
- Added a policy statement requiring the AdSS submitting to AHCCCS the QM/PI Program Plan accompanied by a completed AMPM Policy 920, QM/PI Program Plan Checklist.
- Added a policy statement requiring the AdSS to submit the Health Disparity Summary & Evaluation (HDS&E) Report as a standalone document in accordance with the AHCCCS

- Contract Chart of Deliverables.
- Added a policy statement requiring the AdSS shall ensure Rapid Cycle PIP reports include updates based on the frequency specified within the contract Chart of Deliverables.
- Added a policy statement requiring the AdSS to submit a PIP Initiation Notification for aHCCS review and approval once a PIP is identified.
- Added a policy statement requiring the AdSS to submit a PIP Closure Request for AHCCCS review and approval for self-selected PIP submissions serving as the final PIP report.

Date: June 19, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

970 Performance Measures

Updates/or Summary:

This policy has been revised to better align with AHCCCS updates.

Changes include added definitions and NCQA language in addition to updated language to increase readability of material.

Date: June 12, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policies:

969 Collaborating with Peers and Families

Updates/or Summary:

This new AdSS policy was developed to separate out language from AdSS Medical 964 in order to better clarify programmatic direction.

This policy:

- Sets forth guidance for AdSS OIFAs when collaborating with Member Peers and Families, outlining expectations of interactions with Peer Run Organizations and Family Run Organizations.
- Guidance includes AdSS OIFA participation in Committees.

Revised Policies:

940 Medical Records and Communication of Clinical Information

Updates/or Summary:

This policy has been revised to establish the Administrative Services Subcontractors (AdSS) requirements for protection of Member information, documentation requirements for Member physical and behavioral health records, and specifies record review requirements including the use of Electronic Health Records (EHR) and external health information systems to include:

- Added a statement about Medical Records being available to individuals authorized according to policies and procedures as permitted by law.
- Added a statement for the AdSS to require Providers who distribute information electronically indicate the information is available in paper format upon request.
- Added a statement when telemedicine is conducted, records clearly identify that the visit is a telemedicine visit.
- Added a statement where AdSS shall require Providers to identify the treating or consulting Provider as a Member may have more than one medical record kept by various physical or behavioral health care providers that have rendered services.
- Added a statement where Behavioral health history and information received from an AHCCCS Contractor, TRBHA, or other Provider involved with the Member's behavioral health care, even if the Provider has not yet seen the assigned Member.
- Added a statement for evidence that PCPs are utilizing and retaining developmental screening tools and conducting developmental and Autism Spectrum Disorder (ASD) screenings at required ages, as specified in AMPM Policy 430.

- Changed "Tracking Form" to "Clinical Sample Templates"
- Added a statement for documentation to reflect maternity care providers screen all pregnant Members once a trimester through use of the CSPMP database.
- Added a statement for the AdSS requiring general clinical information that includes supplemental CFT or ART documentation and updates; and additional assessment or screening documentation that provides further evidence to ensure Member's needs are being identified through either standardized assessment or screening tools.
- Changed "Hard Copy" to "Paper Format"
- Added a statement where deficiencies identified are shared with all health plans contracted with the Provider.
- Added a statement where notification is given within 24 hours in order to conduct an independent onsite Provider audit if quality of care issues are identified during the Medical Record review process.
- Added a statement where the AdSS shall ensure electronic information to Members is available upon request as specified in contract.
- Added a statement where the AdSS shall require Providers to safeguard the privacy of Medical Records and information about Members who request or receive services from AHCCCS or its contractors consistent with 9 A.A.C. 22, Article 5.
- Formatting to align with Policy Standards.

1023 Disease / Chronic Care Management

Updates/or Summary:

This policy was revised to align with recent changes to AMPM 1023. Language and formatting was revised throughout the policy to align with current Policy Unit Standards. Removed the section for "Oversight and Monitoring" and moved the information to the section for "Roles and Responsibilities". Definitions were added for "Care Management", Disease/Chronic Care Condition, "Fatal Five", "Long COVID" and "Provider" were added. The definition for "Person Centered Service Plan" was removed.

Date: June 5, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

320-U Pre-Petition Screening, Court-Ordered Evaluation, and Court-Ordered Treatment

Updates/or Summary:

This policy has been revised to reflect recent AHCCCS Medical Policy 320-U updates and in preparation for the operation review as follows:

- Several new definitions added for clarity, including the definition of "Admitting Officer."
- "Physician" was changed to "Admitting Officer" throughout the policy where applicable.
- "Persistently or Acutely Disabled" status and "Gravely Disabled" status were incorporated throughout the policy when referring to "danger to self" and "danger to others."
- The language, "Is unwilling or unable to undergo a voluntary evaluation," was added to the list of reasons for requesting a Pre-Petition Screening.
- Clarified the timeframe "72 hours" is referring to a 72-hour period of time and does not include weekends and holidays.
- "Must" was changed to "shall" throughout the policy to align with Division terminology.
- Added clarifying language regarding voluntary evaluation status.
- General formatting updates and sentence restructuring.

1040 Outreach, Engagement, and Re-engagement for Behavioral Health

Updates/or Summary:

This policy has been revised to align with recent AHCCCS Policy 1040 updates and in preparation for the operational review as follows:

- Definition of "Responsible Person" added.
- Serious Emotional Disturbance designation added to Section B regarding outreach programs to identify members with comorbid medical and behavioral health disorders.
- Additional member populations added to development of outreach programs to identify certain member populations.
- Additional resources added regarding obtaining justice system information.
- New section added regarding engaging members experiencing homelessness.
- New section added regarding coordination of care for members under court-ordered treatment.
- General updates, policy restructuring, and clarifying language added to improve readability.

Date: May 29, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

950 Credentialing and Recredentialing Processes

Updates/or Summary:

This policy has been revised to:

- Establish the requirements for Initial Credentialing, Temporary/Provisional Credentialing, and Recredentialing of Individual and Organizational Providers conducted by the Division of Developmental Disabilities' (Division) Administrative Services Subcontractors (AdSS).
- Update Purpose statement.
- Add new provisions, removed unnecessary provisions, and updated existing language throughout the policy to align with AMPM 950.
- Update language, formatting, and style throughout the policy to align with the Division's Policy Format Manual.

Date: May 22, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

310-L Hysterectomy

Updates/or Summary:

This policy had a very minor revision to update the Supplemental Information section to address concerns that UHCCP brought up regarding reviewing hysterectomy for conditions in Section B and not having documentation of prior medical or surgical treatment.

310-DD Covered Transplants and Related Immunosuppressant Medications

Updates/or Summary:

This policy has been revised to outline the coverage for transplants, related services, and immunosuppressant medications for Division Members who are enrolled with an Administrative Services Subcontractors (AdSS) to include:

- Added definition for Member
- Took out the phrase "and transplant immunosuppressant medications" for SLR being submitted to the Division for any transplant services prior to denying services.
- Added the statement "on the next business day after the denial occurs for retrospective review for any transplant immunosuppressant related medications" for the AdSS submitting a SLR to the Division.
- Minor formatting changes

1001 Second Level Review

Updates/or Summary:

This policy has been revised to outline the requirements related to the Second Level Review process for Arizona Long Term Care System (ALTCS) eligible members. It applies to the Division of Developmental Disabilities Administrative Services Subcontractors (AdSS) to include:

- Took out the phrase "and transplant immunosuppressant medications" for SLR being submitted to the Division for any transplant services prior to denying services.
- Added the statement "The AdSS shall submit a Second Level Review to the Division on the next business day after the denial occurs for retrospective review for any transplant immunosuppressant related medications."
- General formatting to align with Policy Unit standards

Date: May 8, 2024

The policies identified below may be viewed by accessing the Policy & Rules screen on the Division's website.

New Policies:

580 Child and Family Team

Updates/or Summary:

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

The current AdSS Medical 580 Behavioral Health Referral and Intake Process policy is being retired at this time as it is no longer needed. The same information is contained within other Division Medical Policies.

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.

Revised Policies:

310-J Hospice Services

Updates/or Summary:

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.

320-O Behavioral Health Assessments, Service, and Treatment Planning

Updates/or Summary:

Division Medical Policy 320-O and AdSS Medical Policy 320-O, Behavioral Health Assessments, Service, and Treatment Planning, respectively, have 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).

520 Member Transitions

Updates/or Summary:

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 selfsufficient 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 Referrals
- Formatting to align with Policy Unit standards

980 Performance Improvement Projects

Updates/or Summary:

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.

Retired Policies:

580 Behavioral Health Referral Process

Updates/or Summary:

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 of Developmental Disabilities

AdSS Medical Policy Manual Revision History

Date: May 1, 2024

The policies identified below may be viewed by accessing the Policy & Rules screen on the Division's website.

New Policies:

610 AHCCCS Provider Qualifications

Updates/or Summary:

This new policy is developed to specify the Arizona Health Care Cost Containment System (AHCCCS) provider enrollment, revalidation, and re-enrollment requirements.

- Specifies that all Administrative Services Subcontractors (AdSS) Providers register with AHCCCS for consideration of payment by the AdSS for services rendered.
- Outlines the requirements for AdSS Providers of covered services.

Revised Policies:

430 Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Services

Updates/or Summary:

This policy has been revised to establish the requirements for and describes covered Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services for the Administrative Services Subcontractors (AdSS) to include:

- Added definitions for Care Management, EPSDT Visit, Evaluation and Management, Member, Periodicity Schedule, Provider, Responsible Person, Sick Visit, Third Party, Well Child Visit and Work Plan
- Added a section for General Requirements
- Deleted the section for EPSDT Services
- Added a section for Covered Services During an EPSDT Visit
- Added a statement about the AdSS requiring PCPs to utilize validated screening tools for all children to assess for behavioral health needs, Social Determinants of Health (SDOH), and trauma.
- Added Congenital heart defect for screenings conducted during initial and secondary screenings
- Added a statement that the AdSS require case management aligns with CDC's recommendations for actions based on blood lead level and ADHS recommendations
- Added a statement that the AdSS shall include a documented process for ensuring all applicable staff are appropriately trained and kept up to date with the EPSDT program, and AHCCCS policies relevant to EPSDT Members
- Added AzEIP, CRS, Early Head Start, and VCF under written educational outreach topics that the AdSS provides
- Added a statement for targeted outreach to those Members who did not show for appointments

- Added a statement about EPSDT information being in a culturally competent manner, in accordance with the requirements in ACOM Policy 405 and include Oral Health Member outreach as specified in AMPM Exhibit 400-3 and AMPM Policy 431
- Changed the timeframe from 6 months to 60 days for the initiation of treatment being initiated
- Changed the timeframe from 24 months to 30 months of age and younger for providers scheduling EPSDT screenings for children
- Added a statement of the AdSS submitting information on how providers are educated about AzEIP in EPSDT service annual plans, provider manuals, and provider newsletters
- Added statement about the AdSS requiring a transition plan be addressed prior to the Member's 21st birthday to include housing, health insurance, and support services.

Date: April 17, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policies:

530 Member Transitions Between Facilities

Updates/or Summary:

This policy has been developed to establish the requirements for the Administrative Services Subcontractors (AdSS) regarding Division of Developmental Disabilities (Division) Member transfers between facilities to include:

- Coordination activity and data sharing when a Member transitions between facilities
- Criteria of a transfer between inpatient hospital facilities following emergency hospitalization
- Criteria of a Member transfer to a lower level of care facility
- Criteria of a Member transfer to a higher level of care facility

Revised Policies:

510 Primary Care Providers

Updates/or Summary:

This policy has been revised to establish the requirements regarding Primary Care Providers participating in Arizona Health Care Cost Containment System (AHCCCS) programs to include:

- Changed the definition for Business Days
- Changed the definition for Primary Care Provider
- Added a statement for monitoring and adjusting behavioral health medication as specified in AMPM 310-V for prior authorizations for antipsychotic class of medications
- Added a statement for the AdSS to coordinate and collaborate with behavioral health providers
- Added a statement for American Indian Medical Home (AIMH) for coordination of physical and behavioral health services for American Indian Health Program (AIHP) Members enrolled with an AIMH, to include coordination with TRBHAs when applicable
- Added home visits, Member education, preventative health services and screening and referral for health related social needs under coordination of medical care for Member
- Removed the section for Maintenance of the Member medical records
- Added a statement for the AdSS maintaining a current file of Member PCP assignments and accurate tracking of PCP assignments to facilitate continuity of care, control utilization, and obtain encounter data
- Formatting to align with Policy standards

Date: April 10, 2024

The policies identified below may be viewed by accessing the Policy & Rules screen on the Division's website.

Revised Policies:

963 Peer and Recovery Support Service Provision Requirements

Updates/or Summary:

AdSS 963 has been revised to align with AHCCCS updates occurring during the Early Notification/Public Comment process.

Most recent updates occur in Section H. PEER SUPPORT EMPLOYMENT TRAINING CURRICULUM STANDARDS and include:

- Removal of language that provided specific examples for underserved and underrepresented communities; and
- Expansion of Psychiatric Rehabilitation Skills and Service Delivery information to include:
 - a. Addition of "Building Resilience;" and
 - b. Replacement of "Non-violent communication, conflict resolution skills, and deescalation methods to prevent harm, and the ability to apply these techniques in various levels of crisis"; with "Motivational interviewing, communication skills and active listening."

Date: March 27, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

1024 Drug Utilization Review

Updates/or Summary:

This policy was revised to align with recent revisions to AMPM 1024. Language and formatting was revised throughout the policy to reflect the Policy Unit's current standards. The Purpose statement was revised to more clearly describe the AdSS's responsibility for developing and implementing a Drug Utilization Review (DUR) process that includes retrospective, concurrent and prospective drug utilization edits. The Definition section was revised to add definitions for "Abuse", "Exclusive Provider", "Fraud" and "Waste". The Reference section was updated after going out for early notification, 42 USC 1396A(OO) and Social Security Act Section 1927 (g) Drug Use Review were added.

Date: February 28, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Retired Policies:

1250-F Medical Supplies, Equipment, Appliances & Customized Durable Medical Equipment

Updates/or Summary:

This policy has been retired as information is now located in 310-P.

Date: February 7, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policies:

310-L Hysterectomy

Updates/or Summary:

This is a new Policy that was developed to align with recent revisions to AMPM 310-L. This policy establishes the requirements for coverage of Hysterectomy services in accordance with 42 CFR 441.250 et seg for Members who seek to obtain a medically necessary Hysterectomy.

Revised Policies:

310-GG Nutritional Therapy, Metabolic Foods and Total Parenteral Nutrition

Updates/or Summary:

This policy was revised to align with recent revisions to AMPM 310-GG to add the following information: "The AdSS shall be responsible for procurement of and the primary funding source for any other nutritional supplementation medically necessary for Women, Infants, and Children (WIC) exempt formula." Minor grammatical and formatting changes made to align with current Policy Unit standards. The list of metabolic conditions has been replaced with a reference to A.R.S.. § 20-2327. A "Supplemental Information" section was added to show where to locate a listing of metabolic conditions and the Newborn Screening Panel.

320-P Serious Emotional Disturbance and Serious Mental Illness Eligibility Determinations

Updates/or Summary:

This policy has been revised to comply with recent AHCCCS policy updates and Division Annual Policy Review that includes:

- Addition of the new Serious Emotional Disturbance criteria and determination process.
- Additional definitions added for clarity.
- Section regarding "AHCCCS requirements of the Determining Entity" was removed from the body of the policy and placed in a new Supplemental Information Section located at the end of the policy.
- Policy rewritten and reformatted using a new policy writing style to meet Division requirements.
- Minor language revisions throughout the policy to add clarity.

431 Dental/Oral Health Services for EPSDT Eligible Members

Updates/or Summary:

This policy has been developed to establish AdSS requirements for dental/oral health care for Members under 21 years of age who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services to include:

- Adding definitions for Dental Provider, Informed Consent, Medically Necessary, Member,
 Primary Care Provider, Provider, Referral, and Treatment Plan.
- Changing wording from six months to three months when referencing the AdSS reimbursing PCP's for additional fluoride applications.
- Changing wording from second birthday to fifth birthday when referencing the AdSS reimbursing PCP's for additional fluoride applications.
- Added retained and and symptomatic primary teeth as an emergency dental/oral health service.
- Changing wording from two years to five years when referencing fluoride varnish for Members four times a year.
- Added a policy statement where the AdSS shall require Providers maintain completed consents and Treatment Plans in the Member's chart which are subject to audit.
- Changing wording from one year of age to six months when referencing Members being enrolled into a Dental Home.
- Added a requirement where affiliated practice dental hygienists provide documentation of the affiliation practice agreement with an AHCCCS registered dentist that is recognized by the dental board confirming the affiliation agreement.

964 Credentialed Family Support Partner Requirements

Updates/or Summary:

AdSS Medical Policy 964, CREDENTIALED FAMILY SUPPORT PARTNER, has been revised to reflect updates to AHCCCS guidance. Updates include:

- The name of this policy has been changed to remove "Parent."
- Several definitions have been added.
- Guidance for AdSSs on where to submit and obtain approval for the CFSPTP curriculum, competency exam, and exam-scoring methodology has been updated.
- Exam criteria guidance includes at a minimum, questions related to each of the curriculum core elements as specified in this policy.
- Guidance that submissions of AMPM Policy 964, Attachment B shall contain no other information apart from what is required.
- Updates were made to the required CFSPTP core elements.
- CFSP Supervision information has been updated to reflect the AdSS shall establish policies and procedures the amount of hours in addition to the duration of a supervision period. Updates were also made to supervision criteria to guide AdSSs to make copies of credentials available upon request by the AdSS or the Division.
- Information on Peer and Family support is no longer applicable to this policy and has been removed.

New Sections added include:

- Interstate Reciprocity This section discusses recognition of credentials issued by other states or training programs and the requirement that credentials issued in other states be submitted.
- Supplemental Information This section advises that Division's OIFA shall monitor the AdSS'
 OIFA to ensure that all behavioral health provider sites serving multiple Members shall have
 regular and ongoing opportunities for Members or Family Members to participate in decision
 making, quality improvement and enhancement at the provider site.

Date: January 24, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

310-V Prescription Medication Pharmacy Services

Updates/or Summary:

This policy was revised to add "Social Security Act Section 1927 (g) Drug Use Review" to the Reference section.

Date: January 17, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Retired Policies:

310-K Hospital Inpatient Services

Updates/or Summary:

This policy has been retired as it is to become in compliance with AHCCCS policy updates and part of preparation for the AHCCCS OR. Content can be found in AdSS Medical 1020.

Date: January 10, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

420 Family Planning Services and Supplies

Updates/or Summary:

AdSS Medical Policy Manual, Chapter 400 Maternal and Child Health. This policy has been revised to outline the requirements and describes covered services regarding Family Planning Services and Supplies for the Administrative Services Subcontractors (AdSS) to include:

Revision to the AdSS requirements for providing family planning services and supplies which
outlines that the AdSS shall ensure Family Planning or Maternity Care Provider has provided
proper counseling to the eligible Member, prior to insertion of intrauterine and subdermal
implantable contraceptives to contraceptives, to increase the Member's success with the
device according to the Member's reproductive goals.

310-V Prescription Medication Pharmacy Services

Updates/or Summary:

- The policy was revised to align with revisions to AMPM 310-V.
- Formatting and language was updated throughout the policy to align with current Policy Unit standards.
- The Definition section was expanded to align with the policy.

320-V Behavioral Health Residential Facilities

Updates/or Summary:

This policy has been rewritten to reflect the current policy writing style used by the Policy Unit and includes minor revisions due to recent AHCCCS policy updates and the Division's Annual Policy Review. Those revisions include:

- Additional definitions added.
- Clarification of language to improve readability.
- New language added regarding "second-level review".

320-W Therapeutic Foster Care for Children

Updates/or Summary:

This policy has been rewritten to reflect the current policy writing style used by the Policy Unit and includes minor revisions due to recent AHCCCS policy updates and the Division's Annual Policy Review. Those revisions include:

- Additional definitions added.
- Clarification of language to improve readability.

Date: January 3, 2024

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

310-FF Monitoring Controlled and Non-Controlled Medication Utilization

Updates/or Summary:

This policy was originally posted to the website on 09/06/2023 and while the Policy Unit was reviewing another policy it was discovered a minor error was made in section B1d, Exclusive Pharmacy was listed twice. The policy has been corrected to say "Exclusive Pharmacy and exclusive provider".

Date: December 13, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policies:

310-II Genetic Testing

Updates/or Summary:

This policy has been developed to establishes the coverage requirements and limitations of Genetic Testing for the Administrative Services Subcontractors (AdSS) to include:

- Medically necessary Genetic Testing and counseling are covered when criteria is met.
- Limitations to Genetic Testing being covered.
- Ensuring prior authorization requests include documentation regarding how the Genetic Testing is consistent with the Genetic Testing coverage.

310-KK Biomarker Testing

Updates/or Summary:

This policy has been developed to establish the coverage requirements of Biomarker Testing for the Administrative Services Subcontractors (AdSS) to include:

- Medically necessary non-experimental Biomarker Testing that are covered and for what purpose.
- Ensuring coverage is provided in a manner that limits disruptions in care.
- Requiring prior authorization for Biomarker Testing.
- Ensuring a process is available to accept electronic requests from providers for exceptions to a coverage policy.

Date: October 25, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

410 Maternity Care Services

Updates/or Summary:

This policy has been revised to describe the Administrative Services Subcontractors (AdSS) requirements for providing Maternity Care Services to Division of Developmental Disabilities (Division) Members to include:

- Deleting the definition of Free Standing Birthing Centers
- Adding a definition for Member, Provider, Responsible Person and Second Level Review
- Changed the term Pregnant Members to Pregnant Women throughout the policy
- Updated the Pregnancy Termination section to align with AHCCCS
- Added information in the policy regarding Second Level Review criteria under the Pregnancy Termination section
- Added a section for Additional Related Services that the AdSS shall cover when applicable to include circumcisions, home uterine monitoring technology, labor and delivery services, and licensed midwives services
- Formatting to align with Division standards

Date: October 11, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

910 Quality Management and Performance Improvement Program Scope

Updates/or Summary:

This policy was updated to align with current QM/PI program standards, including clarification of requirements regarding the scope, administration, management, and implementation of the Quality Management and Performance Improvement (QM/PI) Program. Changes include added definitions and improved description of the Peer Review process.

Date: September 6, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

310-FF Monitoring Controlled and Non-Controlled Medication Utilization

Updates/or Summary:

The policy was revised to change the name of the policy from "Drug Utilization and Review and Monitoring" to "Monitoring Controlled and Non-Controlled Medication Utilization" because AdSS policy 1024 was also named "Drug Utilization and Review and Monitoring". The language was updated throughout the policy to meet current Policy Unit standards.

The purpose statement was updated to align with AMPM 310-FF. The Definition section was updated to align with the policy. The "Drug Utilization Review" information in the policy was moved to policy 1024 "Drug Utilization Review".

420 Family Planning Services and Supplies

Updates/or Summary:

This policy has been revised to describe the requirements regarding Family Planning Services and Supplies for the Administrative Services Subcontractors (AdSS) to include:

- Include a definition for Business Days, Immediate Postpartum Long-Acting Reversible Contraceptives (IPLARC), Member and Second Level Review.
- Added a section on the Second Level Review process
- Revised the requirement that the provider counsels and recommends the Member continue another form of birth control to prevent pregnancy for up to three months following the Hysteroscopic Tubal Sterilization or Vasectomy.
- Added a requirement that the provider performs a Hysterosalpingogram or sperm count according to the current standard of care for the sterilization procedure to confirm the Member is sterile following the Hysteroscopic Tubal Sterilization or Vasectomy.
- Added a requirements that the Family Planning or Maternity Care Provider has verbally and in writing provided proper counseling and include a statement to the Member about implant removal
- Formatting to align with Division standards

510 Primary Care Providers

Updates/or Summary:

This policy has been revised to describe the requirements regarding Primary Care Providers participating in Arizona Health Care Cost Containment System (AHCCCS) programs. This policy applies to the Division's Administrative Services Subcontractors (AdSS) to include:

- Added definitions for Business Days, EPSDT, Non-Contracting Provider, Member, Resident Physician, and Teaching Physician
- Added a new section for behavioral health services provided by the primary care physician
- Added a new section outlining PCP responsibilities coordinating with a Member's AdSS care manager, provider case manager, Division Support Coordinator, Behavioral Health Complex Team, and
- Division Nurses.
- Added a section outlining coordinating care for behavioral health medication management
- Added a section ensuring behavioral health history and information are received and information is kept in an appropriately labeled file
- Formatting to align with Division standards

541 Coordination of Care with Other Government Agencies

Updates/or Summary:

This policy has been revised to align with current AHCCCS and Division requirements.

- This policy has been updated to align with current Division policy formatting standards.
- The definitions section has been updated
- This policy provides clarification on how the AdSS shall coordinate care with the ADE, DES, DCS, and Courts and Corrections.

940 Medical Records and Communication of Clinical Information

Updates/or Summary:

This policy has been revised to align with AMPM 940 and the Division's policy standards.

- Language added to specify how member records are to be kept
- Clarifying language added to specify documentation of coordination of care activities
- Formatting and grammatical changes made to align with the Division's Policy Format Manual

950 Credentialing and Recredentialing Process

Updates/or Summary:

This policy has undergone extensive revisions and reformatting due to AHCCCS updates, AHCCCS Operational Review requests, Division Annual Policy Review, new policy writing style, and general sentence restructuring to increase clarity and readability. This policy should be reviewed by all applicable staff.

970 Performance Measures

Updates/or Summary:

This policy has undergone extensive revisions and reformatting due to AHCCCS updates, AHCCCS Operational Review requests, Division Annual Policy Review, new policy writing style, and general sentence restructuring to increase clarity and readability. This policy should be reviewed by all applicable staff.

Date: August 30, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policies:

320-Z Members on Conditional Release

Updates/or Summary:

This Policy establishes requirements for the care management and oversight of individuals who have been granted conditional release from the Arizona State Hospital (ASH) by the Superior Court. There was a revision to section B1 to read "The AdSS shall monitor and ensure the behavioral health outpatient providers complete the Conditional Release Monthly Monitoring Report for members on conditional release, and submit the form as directed by the Contractor Chart of Deliverables."

Revised Policies:

1021 Care Management

Updates/or Summary:

AdSS 1021 was completely re-written in order to align the policy with AHCCCS updates made in October 2022 and February 2023 and align with NCQA requirements.

The definition section was edited for clarity and better understanding and to align with the policy. The information about "Conditional Release" was removed to align with updates made by AHCCCS. This information has been moved to a new policy 320-Z.

The policy was updated to elaborate on the stratification process used to identify members for the HNHC program.

Section A10 and A11 were changed from "AdSS Care Management program" to "AdSS Care Management system" and the Definition for "Care Management" was revised to say "Care Management" means a group of activities performed by the AdSS..." instead of the Division".

Date: August 16, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

920 Quality Management and Performance Improvement Program Administrative Requirements

Updates/or Summary:

This policy was revised as part of the Division's Annual Policy Review to align with the AMPM. Formatting and style changes were made to align with the Division's Policy Format Manual. The purpose statement was updated to remove the policy statements. Minor language revisions were made to align with AMPM 920 in Section D.

960 Quality of Care Concern

Updates/or Summary:

This policy was revised to align with changes to AMPM 960. Formatting and structure were updated throughout the policy to improve readability. The reporting requirement was changed from "24 hours" to "next business day." Clarifying language was added throughout the policy to align with AMPM 960.

Date: August 9, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

961 Incident, Accident, and Death Reporting

Updates/or Summary:

This policy has been revised to align with recent Division and AHCCCS policy updates and requirements. The policy has also undergone extensive revisions to reflect a new policy writing style implemented by the Policy Unit. Revisions include:

- New definitions added. Some existing definitions updated or removed.
- Timeframes were changed from "24 hours" to "one business day" and "48 hours" to "two business days."
- Clarifying language added regarding the IAD reporting process and responsibilities.
- Irrelevant language and information removed.
- Policy formatting and writing style.

962 Reporting and Monitoring of Seclusion and Restraint

Updates/or Summary:

This policy has been revised to align with recent Division and AHCCCS policy updates and requirements. The policy has also undergone extensive revisions to reflect a new policy writing style implemented by the Policy Unit. Revisions include:

- New definitions added. Some existing definitions revised or removed.
- Incorporation of the QM Medical Director's responsibilities as applicable to this policy.
- Changed "serious injury" to "injury."
- Clarifying language added regarding reporting requirements, timeframes, and submission of Seclusion & Restraint Reports through the AHCCCS QM Portal.
- Removed language regarding AHCCCS and IOC review of Seclusion & Restraint Reports, actions they may take, and placed it in the Supplemental Information section.
- Policy formatting and writing style.

Date: August 2, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

310-B Title XIX/XXI Behavioral Health Services

Updates/or Summary:

This policy has been revised to describe Title XIX/XXI behavioral health services available to Division of Developmental Disabilities (Division) members who are enrolled with an Administrative Services Subcontractors (AdSS) and establishes requirements for behavioral health services to include:

- Including information about policies and procedures to ensure Members on a form of Medicated Assisted Treatment are not excluded from services
- Added Human Immunodeficiency Virus (HIV) education under the Health Promotion section
- Deleted section on health promotion being provided by qualified BHP's or BHT's
- Deleted the section on Crisis Intervention Services
- Added a section for Permanent Supportive Housing
- Added a section on Intensive Outpatient Programs
- Added a section for Partial Hospitalization programs
- Update formatting to align with Division policy standards

Date: June 7, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

310-GG Nutritional Therapy Metabolic Foods and Total Parenteral Nutrition

Updates/or Summary:

- AdSS 310-GG was revised and a new Division Medical 310-GG was drafted in response to a Corrective Action Plan from AHCCCS.
- This policy describes coverage of and requirements for nutritional therapy, metabolic foods and total parenteral nutrition for Division of Developmental Disability (DDD) members, 21 years of age and older, who are eligible for Arizona Long Term Care System (ALTCS).
- Language and formatting was revised to meet current Policy Unit standards.
- Information about Total Parenteral Nutrition was moved from 310-AA and added to 310-GG.

980 Performance Improvement Projects

Updates/or Summary:

• This policy has been revised and updated and includes language that was changed to align with the update to the AHCCCS policy.

Date: May 17, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policy:

320-B Member Participation In Experimental Services and Clinical Trials

- Participation in clinical trials, however clinical trials are not reimbursed
- Coverage of services related to the Qualifying Clinical Trial
- Determination of coverage within 72 hours
- Approval of a Member's participation in an FDA Phase I or Phase II clinical trial based on criteria
- Second Level Review submission for a Member to participate in Experimental Services or Qualifying Clinical Trial
- Ensuring Member's rights are protected

Date: May 10, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

310-M Immunizations

Updates/or Summary:

A new paragraph was added to advise immunizations will be covered for adults age 19
and older to align with the same update to AMPM 310-M. The update was made because
the Vaccines for Children program continues to provide immunizations through 18 years
of age.

520 Member Transitions

- Updating definitions for Enrollment Transition Information, Member Transition, Medical Equipment and Appliances, and Special Health Care Needs
- Deleted specific examples within policy statements
- Formatted policy statements so they are in line with Division standards

Date: May 3, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policy:

1001 Second Level Review

- Written policies and procedures for processing requests for initial and continuing authorizations of services.
- Decisions to deny a service authorization request or to authorize a service amount shall be made by a Health Care Professional who has appropriate clinical expertise in treating the member's condition or disease.
- AdSS submitting requests for Second Level Review prior to issuing a decision.
- AdSS submitting a Second Level Review to the Division for any transplant services and transplant immunosuppressant related medications prior to denying services.
- Coverage of cleaning for Members who are in an inpatient hospital setting.
- Authorization with clinical documentation that supports medical necessity for required services.
- AdSS may request a peer-to-peer review with the Division Medical Director if there is a disagreement regarding a service authorization.

Date: April 26, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

310-D1 Emergent Dental Services for Members 21 Years of Age and Older

Updates/or Summary:

- Covered dental services by a licensed dentist for Members who are 21 years of age or older.
- Emergency dental services up to \$1,000 per Member per contract year.
- Coverage of services relate to treatment of acute pain, infection or fracture of jaw.
- Coverage of services after a transplant evaluation determines that the Member is an appropriate candidate for organ or tissue transplantation.
- Coverage of cleaning for Members who are in an inpatient hospital setting.
- Coverage of medically necessary emergency dental care and extractions for members age 21 and older who meet criteria for a Dental Emergency.
- Adult emergency services limitations for Members age 21 years and older.
- AdSS and FFS Program responsibilities to include coordination of covered dental services, documentation of valid contracts with dentists, referrals to dentists when emergency dental services are needed, and monitoring and reporting of dental services.
- Ensuring dental services provided to American Indian/Alaska Native Members within an IHS/638 Tribal facility are not subject to the \$1,000 adult emergency dental limit.
- Notification requirements for charges to Members.
- Facility and anesthesia charges.
- Informed consents and treatment plans for Members.

310-D2 Arizona Long Term Care Services Adult Routine Dental Services

- Medically necessary dental benefits up to \$1,000 per Member per contract year for ALTCS Members age 21.
- AdSS responsibilities for coordination of dental services, documentation of valid contracts, monitoring the provision of services, and assurance that dental policies and procedures have been provided to contracted dentists.
- Ensure dental services provided to American Indian/Alaska Native Members within an Indian Health Service (IHS) or 683 Tribal Facility are not subject to the ALTCS dental benefit \$1,000 limit.
- Facility and anesthesia charges.
- Informed Consents and treatment plans for Members, in order to provide quality and consistent care.

• Notification requirements for charges to Member.

310-DD Covered Transplants and Related Immunosuppressant Medications

- Formatting throughout the document to align with the policy standard.
- Deleting the word "approving" when outlining the submission of a Second Level Review to the Division for any transplant services and transplant immunosuppressant medications.
- Including a statement outlining that any AdSS network provider who requests authorization for a service shall be notified of notified of the option of request a peer-to-peer discussion with the AdSS Medical Director.

Date: April 21, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policy:

1001 Second Level Review

- Written policies and procedures for processing requests for initial and continuing authorization of services.
- Timely notification of requests for services that are provided by the Division.
- Decisions to deny a service authorization request or to authorize a service amount shall be made by a Healthcare Professional.
- Authorization requests for certain services submitted to the Division for second level review prior to issuing a decision.
- Submission to the Division for prior authorization with clinical documentation that supports medically necessity.
- Request of a peer-to-peer review with the Division Medical Director if there is a disagreement regarding a service authorization.

Date: March 1, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policy:

310-DD Covered Transplants and Related Immunosuppressant Medications

- General Information
- Covered Transplants
- Covered Transplant Services
- Conditions for Transplantation
- Transplant services and settings
- Transplant care coordination
- Organ Transplant eligibility

Date: February 22, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policies:

1022 Justice Reach-In

Updates/or Summary:

• Information in this policy was previously available in AdSS 1020. This information has now been developed into a stand alone policy piece. Further changes include updates to reflect current formatting standards and removal of outdated information.

310-BB Transportation for Physical and Behavioral Health Services

Updates/or Summary:

This policy was developed to align with the AMPM 310-BB. This is a new policy that
describes covered transportation services for Physical and Behavioral Health services for
ALTCS members. This policy applies to DDD's Administrative Services Subcontractors
(AdSS).

Revised Policy:

1240-D Emergency Alert System

- Adds a purpose statement and definitions to the policy
- Clarifies the criteria that must be met for Members enrolled in AdSS health plans to receive and use Emergency Alert System (EAS) equipment.
- Updates the policy to align with the AHCCCS Medical Policy Manual and with Division Medical Policy 1240-D Emergency Alert System.
- Updates the document to align with DDD's policy formatting standards.

Date: January 25, 2023

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policy:

1020 Utilization Management

Updates/or Summary:

 AdSS Medical 1020 Utilization Management was updated to align with updates to AMPM 1020 that states "The AdSS MM Committee shall evaluate the practice guidelines through a MM multi-disciplinary committee to determine if the guidelines remain applicable, represent the best practice standards, and reflect current medical standards every two years." Previously this was an annual requirement. Language and formatting were updated to reflect current Policy Unit standards.

Date: December 21, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policies:

320-I Telehealth and Telemedicine

Updates/or Summary:

- This policy was revised to align with changes made to AMPM 320-I. Formatting and language was updated to reflect current Policy unit standards. Language was updated for clarity. The purpose statement has been updated. The definition section was updated to add the definition for Synchronous, the definition for Telepresenter was removed. The names for subsections for Telehealth, Asynchronous Services, E-Consult, Remote Patient Monitoring and Audio Services were updated, a new subsection for Telecommunications was removed to align with AMPM 320-I
- The information about conditions for e-consult visits was removed to align with a recent update to AMPM 320-I that is currently out for public comment
- Supplemental information was added for the AHCCCS Telehealth code set and for Teledentristry and Telehealth services.

963 Peer and Recovery Support Service Provision Requirements

Updates/or Summary:

This policy has been updated to current language and formatting standards, as well as
to reflect updated guidance for Administrative Subcontractors regarding training for
provision of Peer Support service within the Administrative Services Subcontractors Peer
and Recovery Support Specialists program, including qualifications, supervision,
continuing education, and training/credentialing.

964 Credentialed Parent/Family Support Requirements

Updates/or Summary:

 This policy has been updated to current language and formatting standards, as well as to reflect AHCCCS updates, including employment competency requirements for Credentialed Parent Peer Family Support Providers.

Retired Policy:

680-C Pre-Admission Screening and Resident Review

Reason for Retirement:

• This policy is being retired as the information contained in it does not apply to the AdSS.

Date: December 7, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policy:

590 - Behavioral Health Crisis Care Services and Care Coordination

- Coordination and coverage of medically necessary services to members after the initial 24 hours of a Crisis episode or discharge from a Crisis stabilization setting.
- Emergency transportation
- · Publication of crisis services
- Coordination of post-crisis care
- Policies establishing post-crisis care coordination expectations

Date: November 9, 2022

The policies identified below may be viewed by accessing the Policy & Rules screen on the Division's website.

New Policy:

570 - Behavioral Health Provider Case Management

- Provision of Provider Case Management services concurrently with DDD
- Monitoring the member's needs, services and progress
- Frequency and type of contact for case management services
- Intensity level for Provider Case management through CFT/ART
- Development of a provider network
- Orientation of new case managers
- Establish a supervisor to case management ratio
- Coordination and communication between Provider Case Management and AdSS care management teams

Date: October 26, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policy:

310-C - Breast Reconstruction After Mastectomy

Updates/or Summary:

• This policy has been developed to align with the AMPM 310-C. This is a new policy that describes covered breast reconstruction surgery services following a mastectomy for ALTCS members. This policy applies to DDD's Administrative Services Subcontractors (AdSS).

Revised Policy:

310-M - Immunizations

Updates/or Summary:

• This policy has been updated to reflect the following: The COVID-2019 vaccine was added to align with the AMPM 310-M. Formatting was updated to reflect the current Policy Unit standards. The Purpose statement was updated. The definition of "Adult" was updated from 19 years of age and older to 18 years of age or order. Language was updated throughout the policy for clarity. Details were added for clarity that prior authorization is not required for medically necessary immunizations.

Date: September 21, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policy:

310-V - Prescription Medication/Pharmacy Services

Updates/or Summary:

 Updated the list of "Conditions and Care of Exclusion from the 5-day Supply Limitation." Per SB1162, 5 additional items were added for both members over 18 years of age and under 18 years of age.

Date: July 20, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policies:

1021 – Care Management

Updates/or Summary:

- · Defines new requirements for Care Management
- Changes reflect a collaborative effort with the Division, AdSS plans and DFSM to ensure Care Management programs are administered consistently and collaboratively in accordance with policy and address the needs of the Division's membership.
- Explains the difference between care management and support coordination services

1023 - Disease/Chronic Care Management

Updates/or Summary:

- Defines new requirements for Disease/Chronic Care Management
- Changes reflect a collaborative effort with the Division, AdSS plans and DFSM to ensure Disease/Chronic Care Management programs are administered consistently and collaboratively in accordance with policy and address the needs of the Division's membership.
- Explains the Disease/Chronic Care Management program requirements

Revised Policy:

1020 - Utilization Management

Updates/or Summary:

 Restructure of 1020 to define UM functions (Data management, Concurrent Review, Discharge Planning, Prior Authorization, Inter-rater Reliability, Clinical Practice Guidelines, New Medical Technology/New Uses for existing Medical Technology) and moved Care Management, Disease/Chronic Care Management, Pharmacy, Justice Program to separate policies.

•	Provides concurrent guidance aligned with AHCCCS requirement for UM functions, including detailed oversight of UM functions.

Date: July 13, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policy:

1024 - Drug Utilization Review

Updates/or Summary:

• This policy has been developed to align with AMPM 1024 Drug Utilization Review. This is a new Policy that defines the Division's responsibility for oversight of the Drug Utilization Review (DUR) program that is developed and implemented by the AdSS.

Revised Policy:

320-M - Medical Marijuana and CBD Oil Products

- Definitions section added
- Revised to state that the Division does not cover medical marijuana or CBD oil products.
- Revised to state that under no circumstances may Division staff or contractors administer or store medical marijuana or CBD oil products.
- Establishes requirements for the coverage and use of medical marijuana and all cannabidiol (CBD) products (regardless of plant derivation).

Date: July 6, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policy:

962 - Reporting and Monitoring of Seclusion and Restraint

Updates/or Summary:

• This is a new policy that mirrors AMPM and sets forth who must report. It describes the AdSS' responsibility to submit reports to AHCCCS through the portal and to IOCs. Sets forth the requirements that the must have mechanisms for oversight, monitoring, tracking and trending of its provider network's compliance with the policy's requirements. Requires periodic reporting by the AdSS to the Division.

Date: June 29, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policy:

280 - Transition to Adulthood

Updates/or Summary:

This policy has been developed as a behavioral health tool for the Division's
Administrative Services Subcontractors to use in order to provide a smooth and
seamless transition from the AHCCCS Children System of Care to the AHCCCS Adult
System of Care.

Revised Policy:

960 - Quality of Care Concerns

- Makes conforming changes to AMPM
- Adds detail about documenting, evaluating, and resolving QOCs, including more detail about when site visits must be conducted.
- Expands on requirements for staff training and provides more detail about inter-rater reliability (IRR) for incident review and QOC investigation
- Removes a section regarding behavioral health providers' duty to warn that does not apply to the Division.

Date: June 22, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policy:

230 - Support and Rehabilitation Services for Children, Adolescents and Young Adults

Updates/or Summary:

- Developed to establish the expectations of support and rehabilitation services as used in Child and Family Team practice.
- Division's responsibilities regarding policy oversight with respect to the AdSS

310-HH - End-of-Life-Care and Advance Care Planning

Updates/or Summary:

- Explains end-of-life care concept, advance planning, and advance directives
- Requires that the AdSS provider network, provider staff and appropriate AdSS staff have training on the end-of-life care concept, advance planning, and advance directives.
- Sets forth reporting requirements by the AdSS to the Division.

310-V - Prescription Medication/Pharmacy Services

Updates/or Summary:

- Prior Authorization required for long-acting opioids
- Additional monitoring of opioids

580 - Early and Periodic Screening, Diagnostic and Treatment Services

- Purpose changes needed due to the Tribal Health Program and AHCCCS integration effective 4/01/22.
- Delineates the responsibilities of the Division and the responsibilities delegated to the AdSS by the Division.

Date: June 15, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policy:

963 - Peer and Recovery Support Services Provision Requirements

Updates/or Summary:

- Information added to correlate with the AMPM Peer and Recovery Support Service Provision Requirements.
- Additional information pertaining to Peer and Recovery Support Specialist and Trainer Qualifications has been added.

964 - Credentialed Parent/Family Support Requirements

- Updated definitions list
- Additional information added regarding Peer and family involvement and participation

Division of Developmental Disabilities

AdSS Medical Policy Manual Revision History

Date: June 8, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policy:

410 - Maternity Care Services

Updates/or Summary:

- Policy was revised to better align with the AMPM
- Updated definitions list
- The AdSS and Provider requirements were moved from the Division Medical policy to the AdSS policy

411 - Women's Preventive Care Services

Updates/or Summary:

- Policy was revised to better align with the AMPM
- Updated definitions list
- The AdSS and Provider requirements were moved from the Division Medical policy to the AdSS policy

420 - Family Planning Services and Supplies

Updates/or Summary:

- Policy was revised to better align with the AMPM
- Updated definitions list
- The AdSS and Provider requirements were moved from the Division Medical policy to the AdSS policy

430 - Early and Periodic Screening, Diagnostic and Treatment Services

- Policy was revised to better align with the AMPM
- Updated definitions list
- The AdSS and Provider requirements were moved from the Division Medical policy to the AdSS policy

431 - Dental/Oral Health Care Services for EPSDT Eligible Members

- The definition section was updated
- "Dental/Oral care" was added throughout the policy

Date: May 25, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policy:

965 - Community Service Agencies

- Revises definitions to BH professional, paraprofessional and technician to comport with AMPM.
- Adds definitions for CSAs and lead contractor
- Clarifies language to make credentialing and monitoring processes clearer including the collaboration among AHCCCS contracted health plans when the CSA participates with more than one.
- Removes language from the section on denial suspension or revocation by AHCCCS of AHCCCS registration that only applies to duties/functions performed by AHCCCS.

Date: May 18, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policy:

950 - Credentialing and Recredentialing Processes

- Makes conforming changes to AMPM
- Adds detail about what constitutes a complete credentialing file

Date: May 11, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policy:

961 - Incident, Accident, and Death Reporting

Updates/or Summary:

This policy sets forth requirements that the AdSS have policies and procedures for its
network of providers and report IADs to the appropriate authoritative agencies.
Tracking and trending of all IADs by the AdSS to identify and address systemic
concerns or issues within the AdSS provider network; and submissions of reports by the
AdSS to the Division describing tracking and trending activities as well as any systemic
concerns or issues identified and how they were addressed.

Date: May 4, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

New Policies:

210 - Working with the Birth through Five Population

Updates/or Summary:

• This policy is designed to strengthen the capacity of Arizona's Behavioral Health System in response to the unique needs of children birth through five years of age and emphasizes early intervention through the use of clinical assessment, service planning, and treatment.

211 – Psychiatric and Psychotherapeutic Best Practices for Children Birth through Five Years of Age

Updates/or Summary:

• This policy establishes best practice processes and goals for psychiatric evaluation and the use of psychotherapeutic and psychopharmacological interventions for children birth through five years of age.

Date: April 20, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised/New Policy:

920 Quality Management/Performance Improvement Program Administrative

Requirements

Updates/or Summary:

- Detail about the content of the QMPI program narrative, workplan evaluation, and workplan.
- New reporting requirements around health disparities and engaging members through the use of technology.
- Name change from American Indian Health Plan to Tribal Health Program throughout the policy.
- Add language regarding AHCCCS' responsibilities and requirements for Division members enrolled in the Tribal Health Program.
- Minor revisions to align with recent AHCCCS updates.

Date: April 6, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised/New Policy:

320-V Behavioral Health Residential Facilities

Updates/or Summary:

- New definition and section regarding Secured Behavioral Health Residential Facilities incorporated into the policy pursuant to ARS 36-425.06(B).
- "member/guardian/designated representative" changed to "member/responsible person" throughout the policy.
- Removal of references to Tribal ALTCS.
- Updates to language regarding prior authorization and notification.

Date: March 9, 2022

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised/New Policy:

970 - Performance Measures

Updates/or Summary:

- Revised to reflect CYE 2021 contract amendment changes related to definitions (adds a definition for Performance Measure Performance Standards PMPS) and reporting.
- Clarifies that the AdSS' management of performance measures is focused on achieving the goals of the triple aim.
- Adds language clarifying that performance measures are essential components of achieving integrated care, and addressing health disparities and social determinants of health.
- Clarifies language around performance measure requirements, analysis, reporting and inter-rater reliability to comport with AMPM changes.
- Clarifies that the AdSS shall report DDD member specific data.

Division of Developmental Disabilities AdSS Medical Policy Manual Revision History

Date: October 1, 2021

The policy identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website. Please send any questions to <u>DDDPolicy@azdes.gov</u>.

DDD will be changing the name of the DDD American Indian Health Plan to the DDD Tribal Health Program (THP) on October 1, 2021.

Please refer to the DDD Tribal Relations page to learn more: https://des.az.gov/services/disabilities/developmental-disabilities/individuals-and-families/ddd-tribal-relations

The following policies have been revised to change the name from the DDD American Indian Health Plan to the DDD Tribal Health Program (THP)

REVISED POLICIES

- 310-G Eye Examinations/Optometry Services
- 310-I Home Health Services
- 310-V Prescription Medication/Pharmacy Services
- 320-U Pre-petition Screening, Court Ordered Evaluation and Court Ordered Treatment
- 320-V Behavioral Health Residential Facilities
- 410 Maternity Care Services
- 430 Early Periodic Screening, Diagnosis and Treatment Services
- 431 Oral Health Care (EPSDT-Age Members)
- 965 Community Service Agencies
- 1020 Medical Management Scope and Components

Division of Developmental Disabilities AdSS Medical Policy Manual Revision History

Date: September 22, 2021

The policy identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website. Please send any questions to <u>DDDPolicy@azdes.gov</u>.

NEW POLICY

542 - Electronic Visit Verification

Description:

This is a new policy that applies to the Division's Administrative Services Subcontractors (AdSS) and the DDD AIHP providers. This Policy establishes requirements for Contractors and providers regarding the mandated use of an Electronic Visit Verification (EVV) system for personal care and home health services pursuant to 42 U.S.C. 1396b(I). The Division is creating this policy in order to be in compliance with AHCCCS AMPM 540.

Division of Developmental Disabilities (AdSS) Medical Policy Manual Revision History

Date: August 4, 2021

The policy identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website. Please send any questions to <u>DDDPolicy@azdes.gov</u>.

REVISED POLICY

450, Out-of-State Placement for Behavioral Health Treatment

This policy has been updated as part of the Operational Review to ensure contract compliance for AdSS delivering services to members regarding out-of-state placement for behavioral health treatment, including:

- · References section removed
- Purpose section updated
- Definitions section added
- Updated section and changed heading from Conditions Before a Referral for Out-of-State Placement is Made to Updated Out-of-State Placement Documentation Requirements
- Updated section and changed heading from Individual Service Plan (ISP) to Member's Service Plan
- Updated section and changed heading from Initial Notification to Division Health Care Services to Notifications to AHCCCS/Division Health Care Management (DHCM) /Division
- Removed section regarding Required Updates to Division Health Care Services
- Removed section regarding Required Reporting of an Out-of-State Provider

580, Behavioral Health Referral and Intake Process

This policy has been updated as part of the Operational Review to ensure AdSS compliance with Division contract and AHCCCS requirements. Revisions were made to improve overall clarity of the policy and provide a clearer expectation of the AdSS' behavioral health referral and intake process.

1010, Medical Management Administrative Requirements

This policy has been updated as part of the Operational Review to ensure AdSS compliance with Division contract and AHCCCS requirements. Revisions were made to improve overall clarity of the policy and provide a clearer expectation of the AdSS' medical management administrative requirements.

1020, Medical Management Scope and Components

This policy has been updated as part of the Operational Review to ensure AdSS compliance with Division contract and AHCCCS requirements. Revisions were made to improve overall clarity of the policy and provide a clearer expectation of the AdSS' medical management scope and components, including:

- Updated Definitions section
- Removed provisions related to Autism spectrum disorder and Lennox-Gastaut Syndrome

Division of Developmental Disabilities Administrative Services Subcontractors AdSS Medical Policy Manual Revision History

Date: July 14, 2021

The policy identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website. Please send any questions to <u>DDDPolicy@azdes.gov</u>.

REVISED POLICY

320-P Serious Mental Illness Eligibility Determination

This policy was revised to comply with the Division's Contract with AHCCCS and incorporate recent AHCCCS policy changes.

Revisions include:

- Definitions added and terminology updated for clarity
- 90 calendar days for an extended evaluation period was changed to 60 calendar days.
- 90-day period of abstinence was changed to 60 days.
- Sentence structuring and reorganization to provide clarity and ease of reading.

Administrative Services Subcontractors (AdSS) Medical Policy Notification

Date: June 16, 2021

The policy identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website. Please send any questions to <u>DDDPolicy@azdes.gov</u>.

Revised Policy

320-V, Behavioral Health Residential Facilities

Revised Division Medical Policy developed as part of the upcoming Operational Review.

New Policy

320-U, Pre-Petition Screening, Court-Order Evaluation, and Court-Ordered Treatment

New Division Medical Policy developed as part of the upcoming Operational Review.

Division of Developmental Disabilities

Provider Policy Notification

Administrative Services Subcontractors (AdSS) Medical Policy Manual

Date: May 24, 2021

The policy identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website. Please send any questions to <u>DDDPolicy@azdes.gov</u>.

Revised Policy

940, Medical Records and Communication of Clinical Information

Update the new name for the Comprehensive Medical and Dental Program (CMDP) to Comprehensive Health Plan (CHP).

Division of Developmental Disabilities Administrative Services Subcontractors (AdSS) Medical Policy Notification

Date: March 24, 2021

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website. Please send any questions to <u>DDDPolicy@azdes.gov</u>.

New Policy:

320-W Therapeutic Foster Care for Children

This is a new AdSS policy developed to establish the requirements for the provision of care and services to members in Therapeutic Foster Care enrolled in a DDD Health Plan.

320-X Adult Behavioral Health Therapeutic Homes

This is a new policy developed to establish the requirements for the provision of care and services to members in Adult Behavioral Health Therapeutic Homes enrolled in a DDD Health Plan.

Please send any questions to DDDDPolicy@azdes.gov. Division of Developmental Disabilities

Administrative Services Subcontractors (AdSS) Medical Policy Notification

Date: March 17, 2021

Revision Effective Date: March 17, 2021

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

The policies identified below may be viewed by accessing the Policy & Rules screen on the Division's website.

Revised Policies

310-B Title XIX/XXI Behavioral Health Services

This policy has been revised in response to an Operational Review audit and to reflect and clarify recent AHCCCS changes to Title XIX/XXI behavioral health services as relates to members enrolled in a DDD Health Plan.

320-S Behavior Analysis Services

This policy has been revised in response to an Operational Review audit and to reflect and clarify recent AHCCCS changes and requirements for Behavior Analysis Service delivery and treatment as relates to members enrolled in a DDD Health Plan. Revisions also include a change in policy name, formerly known as Applied Behavior Analysis.

Please send any questions to DDDDPolicy@azdes.gov. Division of Developmental Disabilities

Administrative Services Subcontractors (AdSS) Medical Policy Manual Notification

Date: March 3, 2021

Revision Effective Date: March 3, 2021

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policy:

<u>Chapter 320-O - Behavioral Health Assessments and Treatment/Service Planning</u>

This policy has been revised to reflect recent AHCCCS policy changes, in accordance with the AHCCCS Contract and Operational Review criteria and should be reviewed by all applicable staff.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

AdSS Medical Policy Manual Notification

Approval Date: 1/27/2021

Revision Effective Date: 1/27/2021

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policy:

520, MEMBER TRANSITIONS

Policy Description:

This policy applies to the Division of Developmental Disabilities (Division) and its Administrative Services Subcontractors (AdSSs). DDD and AdSS must identify and facilitate coordination of care for all members eligible for ALTCS during changes or transitions between AdSSs and changes in service areas and/or health care providers.

Revision Detail:

Updated the content in the section, "Notifications Required of AdSS," and throughout the text, to better describe the forms used in the ALTCS Enrollment Transition Information (ETI) process.

- 520 Attachment A
- AMPM Exhibit 1620

Division of Developmental Disabilities

AdSS Medical Policy Manual Notification

Approval Date: 12/31/2020

Revision Effective Date: 01/01/2021

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policy:

310-P Medical Equipment, Medical Devices, and Medical Supplies

- Transition of the administration of Augmentative & Alternative Communications benefit to the Division's sub-contracted Health Plans
- ACC Augmentative and Alternative Communication (AAC) Device Systems services
 will still be a covered benefit. This change will promote improved access to AAC
 services that are determined to be medically necessary and will support a timely,
 streamlined, and efficient prior authorization process for AAC and associated
 services.
- Many of the current DDD providers are already contracted with the health plans as a provider. Before the transition, DDD and the Health Plans worked with members to identify the most appropriate provider to meet each member's needs.
- This policy applies to the Division's Administrative Services Subcontractors (AdSS).
 This policy outlines requirements for coverage of medically necessary medical equipment, appliances, and medical supplies. Medical equipment and appliances are often referred to as Durable Medical Equipment (DME).

Revision Detail:

- Changes to formatting and language for clarity
- Added new definitions:
 - Augmentative and Alternative Communication (AAC) Device Systems

- Dedicated AAC Devices
- Integrated AAC Devices
- Early and Periodic Screening, Diagnostic and Treatment (EPSDT)
- AAC Assessment
- Treatment
- Maintenance Plan
- Practitioner
- Added a list of ordering practitioners for Medical Equipment and Medical Devices.
- > Changed term physician's and non-physicians to practitioners.
- Added list of Related Services, AAC Device Systems and Requirements, which includes referencing the related Division policy.
- Added Augmentative and Alternative Communication (AAC) Device Systems section, which includes:
 - Coverage
 - Benefits
 - o Medical Review Criteria
 - o EPSDT Criteria
 - o Prior Authorization Requirements for AAC Device Systems and Services

Division of Developmental Disabilities

AdSS Medical Policy Manual Notification

Approval Date: 12/23/2020

Revision Effective Date: 12/23/2020

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

Revised Policy:

OM 940, Medical Records and Communication of Clinical Information

Policy Description: This is a revised policy that establishes requirements for protection of member information, documentation requirements for member physical and behavioral health records, and specifies record review requirements including the use of Electronic Health Records (EHR) and external health information systems.

Revision Details:

- Substantial changes throughout the policy to integrate behavioral health into the policy and to meet AHCCCS contractual obligations and to align with the revision to AHCCCS Medical Policy 940 (AMPM 940).
- Language modified extensively/added/deleted throughout the policy.
- Section headings modified throughout the policy.
- Definitions added.
- Federal, state and AHCCCS citations added.

Division of Developmental Disabilities

AdSS Medical Policy Manual Notification

Approval Date: 10/28/2020

Revision Effective Date: 10/28/2020

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

Revised Policy: This is a revised policy that applies to Medical Management Administrative Requirements.

1010, Medical Management Administrative Requirements

Revision Details:

- Revised Reference section with new references and removed outdated references
- Added a Purpose section title and additional language:
 - The Division of Developmental Disabilities (Division) contracts with Administrative Services Subcontractors (AdSS) and delegates responsibility of implementation of the Medical Management administrative requirements. The Division oversees the AdSS and ensures implementation and compliance of all requirements in this policy.
- Added a Definition section and a definition for Plan-Do-Study- Act (PDSA) Method
- Revised the title of the of Medical Management Plan section to Medical Management
 Annual Plan
 - Removed outdated AHCCCS appendix and checklist references and added new citation.
- Revised Medical Management Administrative Oversight section. Additional language was expanded in this section to ensure all requirements in AHCCCS AMPM 1010 are outlined and that the policy language aligned with AMPM 1010.
 - Changed Medical Director to Chief Medical Officer or designated Medical Director
 - Changed phrase "member or member's authorized representative" to "the member/guardian/designated representative" to align to AHCCCS language.
 - Moved paragraphs to flow with AHCCCS paragraph alignment

Please send any questions to DDDPolicy@azdes.gov

Division of Developmental Disabilities

AdSS Medical Policy Manual Notification

Approval Date: 10/28/2020 **Effective Date:** 10/28/2020

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

1040, Outreach, Engagement, and Re-engagement for Behavioral Health

Policy Description:

This policy establishes requirements of the Division of Developmental Disabilities (Division) for the outreach, engagement, and reengagement activities for members seeking and receiving behavioral health services by each Administrative Services Subcontractor (AdSS). Each AdSS must develop and make available to providers its policies and procedures regarding outreach, engagement, and reengagement, including any additional information specific to their operations.

Outreach includes activities designed to inform individuals of behavioral health services availability and to engage or refer those individuals who may need services. The activities described within this section are essential elements of clinical practice. Outreach to vulnerable populations, establishing an inviting and non-threatening environment, and reestablishing contact with persons who have become temporarily disconnected from services are critical to the success of any therapeutic relationship.

New Policy: This is a new AdSS Medical Policy to comply with AHCCCS contractual obligations.

Division of Developmental Disabilities

AdSS Medical Policy Manual Notification

Approval Date: 10/28/2020

Revision Effective Date: 10/28/2020

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

Reserved Policy:

1050, Reserved

(previously - Coordination of Care with Other Government Entities for Behavioral Health Services)

Division's AdSS Medical Manual Policy MM 1050 is being revised and put into a reserve status.

Division of Developmental Disabilities

AdSS Medical Policy Manual Notification

Approval Date: 10/28/2020

Revision Effective Date: 10/28/2020

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

Reserved Policy:

1060, Reserved

(previously - Training Requirements for Behavioral Health Providers)

Division's AdSS Medical Manual Policy MM 1060 is being revised and put into a reserve status.

Division of Developmental Disabilities

AdSS Medical Policy Manual Notification

Approval Date: 10/28/2020

Revision Effective Date: 10/28/2020

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

970. Performance Measures

This is a revised policy to provide the purpose of performance measurement and the performance measure requirements to meet contractual obligations related to the delivery of care and services to members.

Revised Policy

- Modified Reference section to reflect policy and statute cited within the policy
- Added Definition section and definitions related to policy content
- Renamed Triple Aim section to Overview section and language changed/expanded
 - Moved Triple Aim language to definition section
- Sections were modified and added to the policy and the policy was reformatted. Additional language was modified and expanded throughout the policy to ensure all requirements of AMPM Policy 970 are outlined and that the language aligned with AMPM Policy 970. Language added, removed, and moved to various sections within policy as applicable.
 - Performance Measures section modified/added
 - Performance Measure Requirements section renamed language modified/added
 - Performance Measure Analysis section added
 - Inter-Rater Reliability section added
 - Performance Metric and Measure Reporting section added
 - Quality Rating System section language modified

Division of Developmental Disabilities

AdSS Medical Policy Manual Notification

Revision Effective Date: 9/30/2020

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

Revised Policy:

310-FF Drug Utilization Review and Monitoring

Revisions:

- AHCCCS compliance revising materials in the Division and AdSS manuals;
- Deleted the Division Policy that delegated responsibilities to AdSS and developed a new Division Policy to align with AdSS Policy.
- Clarified language in the introductory sentence.
- Added language in the Minimum Intervention Requirements section to clarify AdSS responsibilities.
- Made minor editorial adjustments.
- The title of this policy changed, it was previously: 310-FF MONITORING CONTROLLED AND NON-CONTROLLED MEDICATION UTILIZATION

310-V Prescription Medication/Pharmacy Services

Revisions:

- AHCCCS compliance revising materials in the Division and AdSS manuals;
- Amended the Division Policy to delegated responsibilities to AdSS.
- Added Purpose section to clarify the purpose of the policy.
- Updated the Definition section.
- Updated the AHCCCS Drug List section.
- Created Generic and Biosimilar Drug Substitutions section and clarified the language.
- Created Additional Information for Medication Coverage section and clarified the language.
- Created Over-The-Counter Medication section and clarified the language.
- Created Prescription Drug Coverage, Billing Limitations and Prescription Delivery section and clarified the language.
- Created Prior Authorization (Pa) Requirements for Long-Acting Opioid Medications section and clarified the language.

- Created 5 -Day Supply Limit of Prescription Short Acting Opioid Medications section and clarified the language.
- Created Additional Federal Opioid Legislation (42 USC 1396a(OO)) Monitoring Requirements section and clarified the language.
- Added Naloxone section.
- Created AHCCCS Pharmacy Benefit Exclusions section and clarified the language.
- Created Return of and Credit for Unused Medications and clarified the language.
- Created Discarded Physician-Administered Medications section and clarified the language.
- Created Prior Authorization (PA) Criteria for Smoking Cessation Aids section and clarified the language.
- Created Prior Authorization (PA) Criteria for Direct Acting Antiviral Treatment for Hepatitis C section and clarified the language.
- Created Vaccines and Emergency Medications Administered by Pharmacists to Persons Age 19 Years and Older section and clarified the language.
- Created Covered Entities and Claim Submission section and clarified the language.
- Created Pharmaceutical Rebates section and clarified the language.
- Created Informed Consent section and clarified the language.
- Added Youth Assent section.
- Added Complementary and Alternative Medicine section.

910 - Quality Management/Performance Improvement Program Scope

Revisions:

Changed policy number from 920 to 910 to align with AHCCCS policy number change

Reference section language added

o To cite CFRs, AHCCCS contract and AMPM Policies referenced in policy

Purpose section added

o This policy establishes requirements regarding the scope and requirements of the Quality Management/Performance Improvement (QM/PI) Program. In addition, this policy describes how the Division monitors the Administrative Services Subcontractors (AdSS) compliance with required QM/PI Program requirements

Definition section added

- o Definitions related to policy content and aligned with AHCCCS, as applicable
- o Added federal code citations

Sections were added to the policy or existing sections modified and the policy was reformatted. Additional language was expanded or changed throughout the policy to ensure all requirements in AHCCCS Medical Policy 910 are outlined and that the policy language aligned with contract and AMPM 910, as applicable.

o Quality Management/Performance Improvement (QM/PI) Program section added

o Quality Management Performance Improvement (QM/PI) Program Components section modified

Language changed and language expanded to provide more detail and clarity of what the Division will do as part of its QM/PI Program. The section added citations of AHCCCS policies and CFRs. Section was reformatted

- o QM/PI Program Administrative Structure Oversight section added
- o QM/PI Program Monitoring and Evaluation Activities section modified Language added to align to align with AHCCCS as applicable, and section reformatted
- o Implementation of Actions to Improve Care section modified

Language changed and added to align to align with AHCCCS as applicable, and section reformatted

920 - Quality Management/Performance Improvement Program Administrative Requirements

Revisions:

Changed policy number from 910 to 920 to align with AHCCCS policy number change.

Purpose section added

o This policy outlines the Division's Quality Management/Performance Improvement (QM/PI) Program administrative requirements. The Division will adhere to all requirements as specified in their contract with AHCCCS, AMPM Policy 920, 42 CFR Part 457 and 42 CFR Part 438. The Division will also monitor the performance of their Administrative Services Subcontractors (AdSS) for compliance with these requirements described in AMPM Policy 920.

Definition section added

- o Definitions related to policy content and aligned with AHCCCS accordingly
- o Added federal code citations

Sections were added to the policy and the policy was reformatted. Additional language was expanded throughout the policy to ensure all requirements in AHCCCS Medical Policy 920 are outlined and that the policy language is aligned with AMPM 920.

- o Quality Management/Performance Improvement Program Plan Sectionexpanded language and revised the format
- o Performance Measure Monitoring Report Section added
- o Performance Improvement Project Report Section added
- o Corrective Action Plan Section added

- o Reporting Requirements Section added
- o Annual Work Plan Section removed, and applicable information moved to the various new sections
- o QM/PI Program Evaluation Section removed, and applicable information moved to the various new sections
- o QM/PI Plan and Evaluation Section removed, and applicable information moved to the various new sections
- o QM/PI Documentation Section renamed to "AdSS Documentation Requirements" and language changed/expanded for clarity

New:

963 - Community Service Agencies

Policy Description:

This policy establishes requirements for the provision of Peer Support services within the Administrative Services Subcontractors (AdSS) programs, including qualifications, supervision, continuing education, and training/credentialing of Peer and Recovery Support Specialists (PRSS). The requirements in this policy are delegated to the AdSS and the Division of Developmental Disabilities (Division) does not perform these functions. The Division oversees the AdSS and ensures implementation and compliance of all requirements in this policy, including reserving the right to assess compliance with these requirements during the Division's annual operational review of each AdSS.

New Policy: This is a new AdSS Medical Policy to comply with AHCCCS contractual obligations.

New:

OM 964 Credentialed Parent/Family Support Requirements

Policy Description:

This policy applies to the Division of Disabilities (Division) Administrative Services Subcontractors (AdSS). This policy establishes requirements expected of each AdSS for training and credentialing standards for individuals seeking employment as a Credentialed Parent/Family Support Provider (CPFSP) in AHCCCS programs. The Division delegates all Parent/Family Support Provider credentialing and training to the AdSS and does not perform this function. The Division may include review of this function during the annual operational review of each AdSS. Services outlined in this policy are monitored by AHCCCS/DCAIR, Office of Individual and Family Affairs (OIFA).

New Policy: This is a new AdSS Medical Policy to comply with AHCCCS contractual obligations.

Division of Developmental Disabilities

AdSS Medical Policy Manual Notification

Approval Date: 08/20/20

New Effective Date: 09/02/2020

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

AdSS QM 965 - Community Service Agencies

Policy Description:

This policy applies to the Division of Developmental Disabilities (Division) Administrative Services Subcontractors (AdSS) responsibility to credentialing and overseeing Community Service Agencies (CSAs). CSAs are unlicensed providers of non-medical, health related, support services. This policy provides a standardized process for reviewing and approving compliance standards as part of the AHCCCS provider registration process and credentialing requirements for CSAs. This policy describes the initial and annual credentialing process conducted by AdSS for CSAs and it establishes AdSS' responsibilities in ongoing monitoring of CSAs for programmatic compliance. Agencies operating licensed programs that provide services or intend to provide services allowable by CSAs shall capture those services under their license. The Division does not credential CSAs and therefore, subcontracts all CSA credentialing and monitoring responsibilities to the AdSS. The Division may review each AdSS' compliance with these requirements during the annual operational review of each AdSS.

New Policy: This is a new AdSS Medical Policy to comply with AHCCCS contractual obligations.

Division of Developmental Disabilities

AdSS Medical Policy Manual Notification

Approval Date: 07/29/2020

Revision Effective Date: 07/29/2020

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

Reserved Policy:

Adss QM 930, MEMBER RIGHTS AND RESPONSIBILITIES

Reason for changes: Operational Review of policy put in reserve. Policy is not needed as policy information can be found elsewhere. Reserved to align with AHCCCS. AHCCCS AMPM Policy 930, Member Rights and Responsibility was reserved 10/1/2018-due to language being available within other areas: Contracts, HIPAA regulations, AHCCCS Privacy Notice. Pertinent information will be incorporated into The Handbook for Members of the American Indian Health Program and/or the Tribal Regional Behavioral Health Authorities and Tribal ALTCS Member Handbook to include language regarding members obtaining services from any FFS provider.

Impact to members: none
Impact to providers: none

Division's AdSS Medical Manual Policy QM930 is being revised and put into a RESERVE status.

Please send any questions to DDDDPolicy@azdes.gov. Division of Developmental Disabilities

Administrative Services Subcontractors (AdSS) Medical Policy Manual Notification

Date: April 22, 2019

Effective Date: April 22, 2019

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

Revised Policy:

320-V Behavioral Health Residential Facilities

Revisions:

The following language was added at the request of AHCCCS:

All authorization requests for Behavioral Health Residential Facility services shall be treated as expedited requests (within 72 hours of receipt of authorization). The Division of Developmental Disabilities (Division) will conduct a second level review on members who are denied BHRF admission.

Frequent withdrawal management services, which can include but are not limited to, detox facilities, medication assisted treatment (MAT) and ambulatory detox.

The following language was removed at the request of the PRT and/or Policy Unit

References throughout this policy to CFT/ART pertain to AdSS and not to Fee-For-Services (FFS) Programs or FFS populations. A CFT/ART is not required for FFS members to receive services

BHRF providers providing services to FFS members must adhere to the below elements.

Definition of Natural Support

Revisions also included minor grammatical, sentence structure, and format changes.

Please send any questions to DDDDPolicy@azdes.gov. Division of Developmental Disabilities

AdSS Medical Policy Manual Notification

Date: 1/15/2020

Revision Effective Date: 1/15/2020

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

New Policy:

320 M. Medical Marijuana and CBD Oil Products

Policy Description:

This policy establishes requirements for the use of medical marijuana and all Cannabidiol (CBD) products (regardless of plant derivation).

New:

The Division created a new policy for the AdSS to align with the AHCCCS policy.

Please send any questions to DDDDPolicy@azdes.gov. Division of Developmental Disabilities

AdSS Medical Policy Manual Notification

Date: 12/04/2019

Revision Effective Date: 12/04/2019

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

The policies identified below may be viewed by accessing the <u>Policies & Rules</u> screen on the Division's website.

New Policy:

320-S Applied Behavior Analysis

Policy Description: This policy establishes the requirements for Applied Behavior Analysis (ABA) service delivery, and treatment for members.

New:

- The Division created a new policy for the AdSS to align with AHCCCS policy.
- Ensures the Administrative Subcontractors (AdSS) handle Applied Behavior Analysis (ABA) services according to the policy.
- Ensures that the Providers meet their contract obligations.

Please send any questions to DDDPolicy@azdes.gov. Division of Developmental Disabilities

Administrative Services for Subcontractors (AdSS) Medical Policy Manual Notification

Date: October 1, 2019

Revision Effective Date: October 1, 2019

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

The following policies have been developed, revised, or reserved for 10/1/19 integration changes, and updates are aligned with the AHCCCS contract.

Revised Policies:

320-P Serious Mental Illness Eligibility

 This policy was revised to include applicability. Changed "Division delivery system" to "AHCCCS delivery system". Added adoption of Exhibits from AMPM. Clarified the process for completion of initial SMI evaluation, SMI decertification process, and criteria for SMI eligibility regarding risk of deterioration.

Please send any questions to DDDPolicy@azdes.gov. Division of Developmental Disabilities

Administrative Services Subcontractors (AdSS) Medical Policy Manual Notification

Date: September 4, 2019

Revision Effective Date: September 4, 2019

All revisions include structural and grammatical changes. The structure and grammar changes support clarity and ensure all newly developed and revised policy present a consistent voice.

The policies identified below may be viewed by accessing the <u>Policy & Rules</u> screen on the Division's website.

The Division is posting the AdSS Medical Policy Manual.

Revised Policies:

Chapter 320-Q, General and Informed Consent

Reference to DDD Medical Policy 320-P was changed to AdSS Medical Policy 320-P