

Division of Developmental Disabilities

POLICY REVISION HISTORY

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Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Policy Manual Notification

Date: October 7th, 2015

The Division Policy Manual has a new look. The Policy Manual was divided into five (5) different manuals.

1. Division Behavior Support Manual
2. Division Eligibility Manual
3. Division Medical Policy Manual
4. Division Operations Manual
5. Provider Manual

To aid in the transition from the old Policy Manual to the five (5) New Policy Manuals, the Policy Unit has created the following tools:

- A chart organized by chapters in the old Policy Manual that documents where the policy section has moved to in the new Policy Manuals.
- A chart organized by chapters in the new Policy Manuals that document where the policy section has moved from in the old Policy Manual.
- The old Policy Manual is posted noting in each section where the policy has moved to in the new Policy Manuals.

To see the new Policy Manuals and tools visit our website:

<https://www.azdes.gov/ddd/>

Click "Oversight & Policy"

As policy frequently changes, and revisions have not yet been posted, please DO NOT PRINT this manual.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Policy Manual Notification

Date: Thursday, July 2, 2015

The Division has posted revisions to the Policy Manual as follows:

Chapter 300 Member Rights and Responsibilities, Section 304 Health Care Directives/Advance Directives

304.3 Prehospital Medical Care Directive

First paragraph added "direct care staff person" as defined in Arizona Revised Statute (A.R.S.) § 36-3251 (L) for clarification and to reflect revisions in A.R.S. § 36-3251 and current Division practice. General formatting and punctuation have also been corrected.

Chapter 400 Support Coordination, Section 406 Planning Documents

Procedures for Reducing Cost Below 100% Within 6 Months

Sixth paragraph, removed "An option to use state funds may be available only for members living in their family's home including Individually Designed Living Arrangements. The option to use state funds is not available for members residing in licensed residential settings such as group homes, child developmental or adult developmental homes." This removal reflects current Division practice.

Chapter 600 Services

602.3.8 Service Evaluation (Day Treatment and Training)

Service Evaluation (Day Treatment and Training) (A)

Added "as required by the Division's Provider Manual, Progress Reporting Requirement", to line item A for clarification and to reflect current Division practice.

602.5 Habilitation

Exclusions

Added "Hourly" to line item H for clarification and to reflect current Division practice.

Chapter 900 Plan Coordination

Table of Contents

908 Residential Placement for Other Than Educational Purposes section title has been corrected to Residential Placement for Educational Reasons (A.R.S. § 15-765).

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Policy Manual Notification

Date: Friday, April 17, 2015

Final Division Policy Manual revisions have been incorporated into the current Division Policy Manual:

Chapter 500 Eligibility: 502.4 Diagnostic and Functional Criteria for Persons Age 6 and Above

Cognitive/Intellectual Disability (A)(6)

The second sentence in this section has been removed to reflect current Division practice.

Chapter 600 Services, Section 602.17 Medical Marijuana

This section has been moved to a new section (section 605) and reflects current Division practice.

Chapter 600 Services, Section 604.7 Dental

Aligning with current Division practice, line item B has been removed. General formatting to the outline of this section has been made to capture the revision.

Chapter 600 Services, Section 604.17 Incontinence Briefs

This section has been revised to provide clarification to current Division practice by adding incontinence pads as a specific example in descriptions of incontinence briefs. In addition, this revision provides conformity with the Arizona Health Care Cost Containment System policy.

Chapter 600 Services, Section 605 Medical Marijuana (New Section Number)

This section has been added to this Policy Manual as reflective of current Division practice.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Policy Notification

Date: Monday, March 2, 2015

Final Division Policy Manual revisions have been incorporated into the current Division Policy Manual.

Chapter 200 Definitions

Planning Document

Correction and reflects current Division practice.

Service Plan Year

Added for clarification and reflects current Division practice.

Chapter 400 Support Coordination, Section 404 Planning Meetings

Initial Planning Meeting (Newly Eligible) (B) (2)(ii)

Added "of the Planning Document" for clarification.

Chapter 400 Support Coordination, Section 406 Planning Document

Planning Document

Aligning with current Division practice, line item H has been added.

Cost Effectiveness Study: Request A Higher Behavioral Health Rate Through The Behavioral Health Unit

Aligning with current Division practice, this section has been revised to reflect documentation required for submission to the Behavioral Health Unit.

Chapter 500 Eligibility, Section 502 Requirements for Division Eligibility

Cerebral Palsy (A)

Epilepsy (A)

Provided for added clarification and aligning with Arizona Administrative Code (A.A.C.) R6-6-302 Guidelines for Determining Developmental Disabilities.

Autism (A)

Added " DSM-"IV" for clarification to current Division practice.

Substantial Functional Limitations

- (A) SELF CARE
- (B) RECEPTIVE AND EXPRESSIVE LANGUAGE
- (E) SELF DIRECTION
- (F) CAPACITY FOR INDEPENDENT LIVING
- (G) ECONOMIC SELF SUFFICIENCY

Added "or other measures of adaptive functioning such as the Vineland Adaptive Behavior Scales or the Adaptive Behavior Assessment System." to each section for clarification to current Division practice.

Minor formatting corrections have been made throughout the document.

Chapter 600 Services, Section 602 Services

602.5 Habilitation

Exclusions

Aligning with current Division practice, line item I has been reinstated to the Policy manual.

General punctuation corrections have been made throughout the document.

602.17 Medical Marijuana

This section has been added to the Policy manual and is current Division practice.

Chapter 800 Specialty Services, 807 Early Childhood Specialty Autism Habilitation

This section has been revised to align with the change in the name of the service. The service name is Habilitation, Early Childhood Autism Specialized.

Chapter 1600 Managing Inappropriate Behaviors, Section 1606 Individual Support Plan Team

Restitution

This section was previously "Reserved". The policy revision reflects clarification regarding restitution and is aligned with current Division practice.

Chapter 2100 Incident Management, Section 2115 Fraud and False Claims

Prevention and Detection: F. Reporting

Simple language and punctuation corrections were made to provide clarification of the reporting process.

The physical address for the Division of Developmental Disabilities, Office of Compliance and Review has been updated.

Chapter 2200 Grievance and Appeals, Section 2204 Appeal Process for Members Who Receive State Funded Services

The physical address for the Arizona Department of Economic Security, Office of Appeals has been updated.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Policy Notification

Date: Tuesday, February 17, 2015

Revision Effective Date: Monday, March 2, 2015

Approved Policy Not Yet Effective:

Chapter 200 Definitions

Planning Document

Correction and reflects current Division practice.

Service Plan Year

Added for clarification and reflects current Division practice.

Chapter 400 Support Coordination, Section 404 Planning Meetings

Initial Planning Meeting (Newly Eligible) (B) (2)(ii)

Added "of the Planning Document" for clarification.

Chapter 400 Support Coordination, Section 406 Planning Document

Planning Document

Aligning with current Division practice, line item H has been added.

Cost Effectiveness Study: Request A Higher Behavioral Health Rate Through The Behavioral Health Unit

Aligning with current Division practice, this section has been revised to reflect documentation required for submission to the Behavioral Health Unit.

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Added " DSM-"IV" for clarification to current Division practice.

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- (A) SELF CARE
- (B) RECEPTIVE AND EXPRESSIVE LANGUAGE
- (E) SELF DIRECTION
- (F) CAPACITY FOR INDEPENDENT LIVING
- (G) ECONOMIC SELF SUFFICIENCY

Added "or other measures of adaptive functioning such as the Vineland Adaptive Behavior Scales or the Adaptive Behavior Assessment System." to each section for clarification to current Division practice.

Minor formatting corrections have been made throughout the document.

Chapter 600 Services, Section 602 Services

602.5 Habilitation

Exclusions

Aligning with current Division practice, line item I has been reinstated to the Policy manual.

General punctuation corrections have been made throughout the document.

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This section has been added to the Policy manual and is current Division practice.

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This section has been revised to align with the change in the name of the service. The service name is Habilitation, Early Childhood Autism Specialized.

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The physical address for the Arizona Department of Economic Security, Office of Appeals has been updated.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Policy Notification

Date: Monday, January 26, 2015

Revision Effective Date: Monday, March 2, 2015

Approved Policy Not Yet Effective

Chapter 1600 Managing Inappropriate Behaviors, Section 1606 Individual Support Plan Team

Restitution

This section was previously "Reserved". The policy revision reflects clarification regarding restitution and is aligned with current Division practice.

Effective Date: 03/02/2015

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Policy Manual Notification

Revision Effective Date: October 1, 2014

Highlights of This Notification:

The Division's Policy Manual has been revised for clarification and conformity with current practice.

Chapter 400-Support Coordination

Revision:

404 Planning Meetings
 Meeting Location

- For clarity and conformity to current practice.
- Effective date: October 1, 2014.

Please contact the [Policy Unit](#) if you have any questions.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities Policy Manual Notification

Revision Effective Date: September 15, 2014

Highlights of This Notification:

The Division's Policy Manual has been revised to provide conformity with current practice.

Chapter 600-Services

Removed:

602 Services

602.4 Employment Related Programs

- D. Transition to Employment.
- *This service is not available at this time.*
- Effective date: September 15, 2014.

Revised:

602 Services

602.4 Employment Related Programs

- Reformatting of E. and F. to incorporate removal of "D. Transition to Employment".
- Effective date: September 15, 2014.

Chapter 800-Specialty Services

Removed:

800 Specialty Services

808 Habilitation Consultation

- *This service is not available at this time.*
- Effective date: September 15, 2014.

Please contact the [Policy Unit](#) if you have any questions.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Policy Notification

Approved Policies Not Yet Effective Date: September 1, 2014

Highlights of This Notification:

The Division's Policy Manual has been revised for compliance with AHCCCS requirements, conformity with current practice, clarification and correction.

Many chapter subsections have been edited for consistent formatting; subsection numbering has been deleted. All other formatting remains the same.

In all instances:

- The term "Child Protective Services (CPS)" has been revised to reflect the establishment of the Department of Child Safety (DCS).
- The term "Qualified Mental Retardation Professional (QMRP)" has been revised to "Qualified Intellectual Disabilities Professional (QIDP)."

Chapter 200-Definitions

Revision:

Definitions for the following have been moved from Chapter 800 and added to Chapter 200.

Behavioral Health Service
Behavioral Health Individual Service Plan
Individual Family Service Plan
Individualized Education Plan

Chapter 400-Support Coordination

Revision:

Effective Date corrected from July 30, 2009 to July 31, 1993. Revision history confirmed the July 31, 1993 date was inadvertently changed in the January 31, 2014 revision of this chapter.

Table of Contents, section 402, formatting correction.

404 Planning Meetings

Initial Planning Meeting (Newly Eligible)

- Clarified A.3.ii. by removing the form number and replacing with form name.

405 Coordination of Care

Acute Medical Care

- Added section to include:
"Each subcontracted health plan has an identified liaison to assist with the coordination of care for Division members enrolled through the Arizona Long Term Care System (ALTCS) program."

The Support Coordinator will:

- A. *Contact the health plan liaison when a member has a concern related to medical services received or needed from the subcontracted health plan.*
 - B. *Contact HCS when there are issues that cannot be resolved with the liaisons."*
- Moved for clarity from Chapter 900 section 907 Coordination of Care Between the Division and Health Plans.

Children's Rehabilitative Services (CRS)

- For clarity and conformity to current practice, added new section to this chapter for clarity.

Behavioral Health

- Added "Provider" to "B. Behavioral Health Treatment Plan (From RBHA Provider)" for clarity and corrected the term "behavior" to "behavioral" in segments B and D of this section.

Child Protective Services and Adult Protective Services

- For clarity and conformity to current practice, changed section title to "Protective Services."

Department of Child Safety (DCS)

- For clarity and conformity to current practice, added new section to chapter, previously Child Protective Services (CPS).
- This information has been moved from Chapter 800 and added to Chapter 400.

Department of Education/Local Education Agency

- Added for clarity "Arizona" to the title of this section.

School Based Claiming For Medicaid

- For clarity and conformity to current practice, moved from Chapter 800 and added to Chapter 400.
- Included hyperlink to the AMPM Chapter 700.

406 Planning Document

Contingency Plan (Back-up Plans)

- For conformity with the new requirement in RFQVA #710000 Provider Contract Amendment, "E. Nursing" was added.

Transfer Plan

- For clarity, this section was moved from Chapter 800 and added to Chapter 400.

Chapter 600-Services

Removed:

604.7 Augmentative Communication

- This information has been moved for clarity to Chapter 800 Specialty Services.

605 Member and Family Assistance

- This information has been moved for clarity to Chapter 800 Specialty Services.

606 Home Modifications

- This information has been moved for clarity to Chapter 800 Specialty Services.

607 Community Transition Services

- This information has been moved for clarity to Chapter 800 Specialty Services.

608 Emergency Alert System

- This information has been moved for clarity to Chapter 800 Specialty Services.

609 Intensive Behavioral Treatment

- For clarity and conformity with Amendment#1 RFQVA 710000, this section has been renamed and moved to Chapter 800, Specialty Services, Early Childhood Autism Specialized Habilitation.

Revision:

Section numbers have been revised to reflect revisions to this chapter from moving sections into other chapters.

602 Services

Day Treatment and Training

Exclusions

- For clarification, *deleted "vocational program or habilitation"* from "D. Be used when another service, such as an employment service, is more appropriate."
- For conformity with Amendment#1 RFQVA 710000, added the following exclusion: "E. Include wage-related activities that would entitle the member to wages."

Habilitation

Exclusions

- For conformity with Amendment#1 RFQVA 710000 revised "G. Habilitation shall not be provided in a provider's residence unless the residence is also the home of the member receiving this service" by removing " unless approved by district management."

- For conformity with Amendment#1 RFQVA 710000, added "H. Habilitation shall not be provided in a Qualified Vendor owned or leased service site."

Employment Related Programs Service Description and Settings

- For conformity with Amendment#1 RFQVA 710000, added the new service "Transition to Employment" as letter D.

Chapter 800-Meeting Process

Removed:

801 Overview

- This information has been removed and is addressed in training, Provider Manual, and Chapters 200 and 400 of this Policy Manual.

802 Meeting Process

- This information has been removed and is addressed in training.

803 Coordination With Other Plans

- The heading was deleted and the plans described under this heading were moved to Chapter 200 and 400.

Revision:

803.1 Individual Family Service Plan

- This term is now defined in Chapter 200 Definitions.

803.2 Individualized Education Plan

- This term is now defined in Chapter 200 Definitions.

803.3 Foster Care Case Plan

- This term has been removed will be defined in Chapter 200 Definitions in a future revision.

803.4 "Behavioral Health Service" and "Treatment Plan"

- These terms are now defined in Chapter 200 Definitions.

803.5 Transfer Plan

- This section has been moved to Chapter 400 Support Coordination.

804 Responsibilities of Other Planning Team Members

- This information has been moved to the Provider Manual.

Chapter 800- Specialty Services (NEW)

Revision:

Chapter name changed to Specialty Services.

801 Overview

802 Augmentative Communication

- This information has been moved from Chapter 600 Section 604 to Chapter 800.

803 Member and Family Assistance

- This information has been moved from Chapter 600 Section 605 to Chapter 800.

804 Community Transition Services

- This information has been moved from Chapter 600 Section 607 to Chapter 800.

805 Emergency Alert System

- This information has been moved from Chapter 600 Section 608 to Chapter 800.

806 Home Modifications

- This information has been moved from Chapter 600 Section 606 to Chapter 800.

807 Early Childhood Autism Specialized Habilitation

- This information has been moved from Chapter 600 Section 609 to Chapter 800.

Responsible Person's Participation

- For conformity, revised "C. Are expected to attend and participate in the Habilitation sessions, which include the HBM or HBB Consultant, and in any modification of the *Intensive Behavioral Treatment* Program during the course of treatment. This is to ensure that the goals important to the family are included and to provide additional guidance on the specific strategies."
- to read "C. Are expected to attend and participate in the Habilitation sessions, which include the HBM or HBB Consultant, and in any modification of the Program during the course of treatment. This is to ensure that the goals important to the family are included and to provide additional guidance on the specific strategies."

Exclusions

- For clarity, revised the exclusion, "The implementation portion of the intervention plan shall not be provided in school or in transit to schools"

- to read "The implementation portion of the intervention plan shall not be provided in school or in transit to and from schools." (Emphasis added.)

New:

- 808 Habilitation Consultation
- This is a new service.
 - Effective Date: September 1, 2014

Chapter 900- Plan Coordination

Removed:

- 907 Coordination of Care Between the Division and Health Plans
- This information has been moved to Chapter 400 Support Coordination from Chapter 900.

907.1 School Based Claiming for Medicaid

- This information has been moved to Chapter 400 Support Coordination from Chapter 900.

Revision:

- 908 Discharge Planning
- This section has been renumbered to 907.
- 909 Residential Placements for Educational Reasons (ARS 15-765)
- This section has been renumbered to 908.

Chapter 1200 – Payment for Services

Revision:

The terms "consumer" and "individual" have been changed to "member" in this chapter.

- 1202 Client Billing
- Cost of Care
- Removed the term "Cost of Care" wherever it appeared and replaced it with "Financial Contribution" to conform to language of A.R.S. § 36-562.

Financial Contributions and Billing for Residential Services

- Revised this section to conform to A.R.S. § 36-562.

Chapter 1600 – Managing Inappropriate Behaviors

Revision:

Revised January 31, 2014 Policy Notification to reflect removal of Section 1606.2.

Removed:

Section 1606.2 – Restitution

- This section was removed in January 2014 and inadvertently not included on the January 2014 Policy Notification. The January 2014 Policy Notification has been revised.

Chapter 1800 – Records Management

Revision:

Removed all Appendix citations.

Removed A.R.S. statutes that are no longer applicable.

1802 Confidentiality

Confidential Information

- Removed “child/adult” in second paragraph for conformity with current practice.

1809 Record Storage and Security

Destruction of Records

- Revised statement from “Records will be destroyed in accordance with the records retention schedule (Appendix 1800.B)” to “Records will be destroyed in accordance with the records retention schedule in compliance with [A.R.S. § 12-2297](#).”
- Included Arizona Revised Statute citation and hyperlink for clarity.

New:

1810 Management and Maintenance of Records Related to the Medicaid Line of Business

- New section, conformity with State law and compliance with Arizona Health Care Cost Containment System requirement.
- Effective Date: September 1, 2014

Chapter 2100 – Incident Management

Revision:

2115 Fraud and False Claims

Corporate Compliance

- Added first paragraph “*The Corporate Compliance Officer implements, oversees and administers the Division’s compliance program including fraud and abuse control. The Corporate Compliance Officer shall be an on-site management official, available to all employees, with designated and recognized authority to access and provide records and make independent referrals to the AHCCCS Office of Inspector General.*”
- Compliance with Arizona Health Care Cost Containment System requirement and clarification of current practice.

Chapter 2200 – Grievance And Appeals

New:

2211 Claim Disputes

Overturned or Reversed Claim Disputes

- Added new section "The Division or its Subcontractors shall reprocess and pay overturned or reversed claim disputes, in full or in part within 15 business days of the date of the Decision. The Division or its Subcontractors will make payments in a manner consistent with the Decision."
- Compliance with Arizona Health Care Cost Containment System requirement and clarification of current practice.
- Effective Date: September 1, 2014

Please contact the [Policy Unit](#) if you have any questions.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Policy Notification

Revision Effective Date: April 1, 2014

Highlights of this revision:

The Division's Policy Manual has been revised to meet AHCCCS requirements; and for conformity with current practice, clarification and correction.

All chapters listed in this Notification:

The term "Intermediate Care Facility for Person with Intellectual Disability (ICF/ID)" has been changed to "Intermediate Care Facility for Individuals with an Intellectual Disability (ICF/IID)" throughout all chapters in this Notification.

Chapter 400-Support Coordination

Revisions:

- 404 Planning Meetings
 - Scheduling Subsequent Meetings
 - Removed "and location" from second sentence of the paragraph. Correction and conformity with current practice. (page 400-17)
- 405 Coordination of Care
 - Behavioral Health
 - Added "Additional information is available on the Arizona Division of Health Services/Division of Behavioral Health Services (ADHS/DBHS) website for each RBHA Provider Manual." Conformity with current practice. (page 400-19)
 - Coordination of Care between the Division and the School System
 - Formatting correction. (page 400-22)
- 406 Planning Document
 - Removed "the" and added "their" from second paragraph, letter C. Correction. (page 400-22)

Chapter 500-Eligibility

Revisions:

- 507 Determination of ALTCS Eligibility
 - Added section 507.3 Pre-Admission Screening (PAS) from Chapter 700, section 704. Conformity with current practice. (page 500-23)
- 509 Eligibility Categories
 - Formatting corrections. (pages 500-26 and 27)
- 510 Responsibilities of the Member/Responsible Person When Eligible for the Division
 - Added this section from Chapter 800, section 804.2. Moved for clarity. (page 500-26)

- Changed title of this section.
 - Added “are” to “Responsibilities include but” to lead statement. Clarity. (page 500-27)
- 511 Inventory for Client and Agency Planning (ICAP)
- Added this section from Chapter 700, section 703. Conformity with current practice. (page 500-27)

Chapter 600-Services

Revisions:

- 602 Services
- 602.12.3 Service Requirements (Respite)
- Letter A
 - **Removed** “include obtaining a notarized medical consent if the caregiver will not be immediately accessible.” Conformity with current practice. (page 600-38)
- 602.12.6 Service Provision Guidelines (Respite)
- Letter D
 - **Removed** “A service unit of one (1) hour will be authorized for short-term respite up to thirteen (13) continuous hours in a calendar day.

A service unit of one (1) day will be authorized for extended respite of more than thirteen (13) continuous hours in a calendar day. A provider for short-term respite will bill the actual hours provided. A provider will bill for extended respite for the appropriate number of days of service. This billing for extended respite will also include the cumulative hours of service provided on the Uniform Billing Document.” Conformity with current practice. (page 600-45)

 - **Added** “For respite billing information see Department of Economic Security, Division of Developmental Disabilities Rate Book located on the Division’s website at https://www.azdes.gov/uploadedFiles/Developmental_Disabilities/ddd_ratebook.pdf.” Conformity with current practice. (page 600-45)

Chapter 700- Assessments

Removed:

- 703 Inventory for Client and Agency Planning (ICAP)
- This information has been incorporated in Chapter 500, section 511 Determination of ALTCS Eligibility.
- 704 Pre-Admission Screening (PAS)
- This information has been incorporated in Chapter 500, section 507.3 Determination of ALTCS Eligibility.

Revisions:

- 703 Pre-Admission Screening and Resident Review (PASRR)
- This section has been renumbered. (page 700-2)

Chapter 800-Meeting Process

Removed:

- 804 Responsibilities of Each Team Member
 - 804.1 Responsibilities of Support Coordinator/Plan Coordinator
 - Information covered in Chapter 400 Support Coordination.
 - 804.2 Responsibilities of the Member/Family/Responsible Person
 - Incorporated in Chapter 500, section 510.
- 805 Resolving Differences of Opinion Among Planning Team Members
 - This information has been removed and is addressed in training. (page 800-6)

Chapter 900- Plan Coordination

Removed:

- 903.5 Qualified Vendors and AzEIP Day Treatment and Training/Special Instruction and Therapies
 - This information is obsolete and has been removed.

Chapter 1000-Plan Monitoring

Removed:

- 1002 Plan Review Elements
 - This information was incorporated in Chapter 400 Support Coordination as part of the January 31, 2014 revision.
- 1003 Plan Review Documentation
 - This information was incorporated in Chapter 400 Support Coordination as part of the January 31, 2014 revision.

Revisions:

This chapter will be "RESERVED".

Chapter 1400- Special Programs

Removed:

- 1401 Behavioral Health
 - This information has been incorporated in Chapter 400 Support Coordination, Section 405 Behavioral Health.
- 1402 Arizona Early Intervention Program (AzEIP)
 - This information is obsolete and has been removed.

Revisions:

This chapter will be "RESERVED".

Chapter 2100-Incident Management

Revisions:

- 2103 Incident Management System (IMS) Definitions
 - Added letter T Health Care Acquired Condition. AHCCCS requirement. (page 2100-6)

2104 Reporting Requirements

- Removed "If these people" and replaced with "Mandatory reporters who". Conformity with current practice. (page 2100-7)
- Removed "they" in first sentence of paragraph above. Clarification. (page 2100-7)
- Added "Support Coordination and Incident Reporting" in this Policy Manual for additional information regarding mandated reporting. Clarification. (page 2100-7)

2116 Health Care Acquired Conditions

- Added Identifications and Reporting. AHCCCS requirement. (page 2100-28)

Please contact the [Policy Unit](#) if you have any questions.

Thank you,
Stefanie Schwartz-Jacobs
Policy Manager

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Policy Notification

Revision Effective Date: March 10, 2014

Highlights of this revision:

The Division's Policy Manual has been revised for clarification and correction.

Chapter 400-Support Coordination

Revisions:

404 Planning Meetings

Subsequent Planning Meetings

- Section Targeted
 - Numbering corrected in this section. (page 400-14)
- Section DD Only (DDD) 1.iii.c. Clarified language. (page 400-15)
- All references to Nursing Facility meeting requirements were corrected from 90 days to 180 days. (pages 400-10, 400-13, 400-17)

406 Planning Document

Contingency Plan (Back-up Plans)

- "Contingency Plan (Back-up Plans)" - Second paragraph, second sentence corrected by adding the word "not"; "Family members should **not** be considered as a substitute for a back-up plan." (page 400-26)

Please contact the [Policy Unit](#) if you have any questions.

Thank you,
Stefanie Schwartz-Jacobs
Policy Manager

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Policy Notification

Revision Effective Date: January 31, 2014

Highlights of this revision:

The Division's Policy Manual has been revised for clarification, correction, and conformity with AHCCCS requirements and to conform to current Division practices and terminology.

Entire Policy Manual

- The term "Consumer/Individual" has been changed to "Member" throughout the Policy Manual.
- The Table of Contents will be revised as necessary and shown in the posted final versions of the Chapters listed below.
- Future formatting revisions to the Policy Manual will not change the revision date. All formatting revisions will appear in the posted Policy Manual.

Chapter 100-Introduction

Revised to reflect current practice.

Chapter 300-Member Rights and Responsibilities

Revisions:

- This Chapter was previously "Reserved".
- Chapter 1500, Individual Rights and Responsibilities, has been moved to this Chapter.

Chapter 400-Support Coordination

Revisions:

401 Overview

- Revisions made for conformity.

402 Components of Support Coordination

- Previously titled "Role of Support Coordinator".
- "Contracted Support Coordination" and "Navajo Nation Contracted Support Coordination" has been moved to this Section from Section 406.
- "Support Coordination/Arizona Early Intervention Program" has been moved to this Section from Section 409.
- Revisions made for clarity and conformity with current practice and AHCCCS.

403 Planning Team Members

- Previously titled "Responsibilities of the Support Coordinator".
- "Planning Team Membership" moved to this Section from Chapter 800:805.
- Revisions made for clarity and conformity with current practice.

404 Planning Meetings

- Previously titled "Assignment of Support Coordinators".
 - "Assignment of Support Coordinators" has been moved to Chapter 500.
- This Section includes the following Sub-Sections.
 - Member Attendance
 - Initial Planning Meeting (Newly Eligible)
 - Subsequent Planning Meetings
 - Scheduling Subsequent Meetings
 - Focus ISP Date (Set in stone date)
 - Meeting Location
 - Special Meetings
 - Mandatory Reporting
- The following sections have been incorporated into this Section.
 - 806.1 Frequency of Meetings
 - 806.2 Notice of Planning Meetings
 - 807–807.7 Components of the Plan
 - 808.5 Special Planning Team Meetings
 - 1002–1002.2 Plan Reviews
 - 1004 Mandatory Reporting of Abuse/Neglect
 - 1005 Quality Assurance Responsibilities
- Requirement to complete placement meetings 10 days after a member moves from one placement type to a different placement type has been added to policy.
- Revisions made for clarity and conformity with current practice.

405 Coordination of Care

- Previously titled "Courtesy Support Coordination".
 - "Courtesy Support Coordination" has been removed from policy and is now available as an internal procedure.
- "Coordination of Care" has been moved to this Section from 912–912.4.1.
- Revisions made for clarity and conformity with current practice.

406 Planning Document

- Previously titled "Contracted Support Coordination (Case Management)".
 - "Contracted Support Coordination" moved to Section 402 of this Chapter.
- The following Sections have been incorporated into this Section.
 - 702 Description of Assessment Process
 - 803.1 Service Plan
 - 803.2 Risk Assessment Plan
 - 803.3 Contingency Plan (Back-up Plans)
 - 804 Operating Principles
 - 808.3 Arizona Long Term Care System (ALTCS) Enrollment Requirements
 - 808.4 ISP/IFSP Reviews
 - 808.5 Special Planning Teams Meetings

- o 808.6 Plan Changes Not Requiring Planning Team Meetings
- o 905 Cost Effectiveness Studies (CES)
- Revisions made for clarity and conformity with current practice.

407 Service Authorization

- Previously titled "Targeted Support Coordination".
 - o Information from "Targeted Support Coordination" incorporated in "Planning Meetings– Section 404" and "Planning Document–Section 406" in this Chapter.
- "Service Authorization" has been moved to this Section from Chapter 900:904.
- Revisions made for correction and clarity.

408 Arizona Long Term Care (ALTCS) Non-Users

- Previously titled "State Funded Support Coordination".
 - o Information from "State Funded Support Coordination" incorporated in "Planning Meetings– Section 404" and "Planning Document– Section 406" in this Chapter.
- "Arizona Long Term Care (ALTCS) Non-Users" has been moved to this Section from Chapter 1000:1003.
- Revisions made for correction and clarity.

409 Case Closure

- Previously titled "Service Coordination/Arizona Early Intervention Program".
- "Case Closure" moved to this Section from Chapter 1100.
- Revisions made for correction and clarity.

Removed:

Inactive Status 408.1 has been removed from policy and is now available as an internal procedure.

"Courtesy Support Coordination" has been removed from policy and is now available as an internal procedure.

Chapter 500–Eligibility

Revisions:

This Chapter has been renumbered.

505 Assignment of Support Coordinators

- Assignment of Support Coordinators has been moved to this Section from Chapter 400.

Added:

509 Eligibility Categories

- This is a new Section in this Chapter.

Chapter 600–Services

Revisions:

This Chapter have been renumbered.

601 Overview

- Added Home and Community Based Service Delivery to describe the three service delivery models; Traditional, Agency With Choice, and Individual Independent Providers.

602 Services

- This Section has been renumbered.
- 602.1 Assisted Living Centers
 - Administrative Directive 60 (Assisted Living Center Guidelines) has been incorporated into this Section.

603.1 Contracted Health Plans

- The following information has been moved to this Section from Chapter 900.
 - Children's Rehabilitative Services
 - Comprehensive Medical and Dental Program
 - Member Acute Care Card
 - Health Plan Responsibilities

Appendix D–Skilled Nursing Matrix

- This Appendix has been revised for conformity.
- This Appendix is available in the Appendix Chapter of the Policy Manual.

Chapter-700**Revisions:**

This Chapter has been renumbered.

701 Overview

- Revisions made for conformity.

702 Assessment Requirements for Members Placed in Residential Settings

- Previously titled "Description of the Assessment Process".
 - "Description of the Assessment Process" has been incorporated into Chapter 400, Support Coordination.

Removed:

703 Family/Socio Medical History

Chapter 800–Meeting Process**Revisions:**

- This Chapter has been renumbered.
- Previously titled "Plan Development".

801 Overview

- Revisions made for conformity.

803 Coordination with Other Plans

- Previously titled "Policy"
 - "Policy" has been incorporated into Chapter 400 Support Coordination.

804 Responsibilities of Each Team Member

- Previously titled "Operating Principles"
 - "Operating Principles" has been incorporated into Chapter 400 Support Coordination.

805 Resolving Differences of Opinion Among Planning Team Members

- Previously titled "Planning Team Membership"
 - "Planning Team Membership" has been moved to Chapter 400 Support Coordination.
- "Procedures for Resolving Differences of Opinion Among Planning Team Members" previously Section 811.
- Revision made for correction.

Frequency of Meetings

- Previously was section 806.1
 - "Frequency of Meetings" has been incorporated into Chapter 400 Support Coordination.

Notice of Planning Meetings

- Previously was section 806.2
 - Notice of Planning Meetings has been incorporated in Chapter 400 Support Coordination.

Components of the Plan

- Previously was section 807 - 807.7
 - "Components of the Plan" has been incorporated in Chapter 400 Support Coordination.

Documentation Requirements for Each Type of Plan

- Previously was section 808
 - "Documentation Requirements of Each Type of Plan" has been incorporated in Chapter 400 Support Coordination.

Removed:

802 Definition

- This section has been removed and will be incorporated into Chapter 200 Definitions in a future policy revision.

Chapter 900-Plan Coordination

Revisions:

This Chapter has been renumbered.

901 Overview

- Revision made for conformity.

904 Short Term Emergency Situations (Residential and Day Programs)

- Previously titled "Service Authorization"
 - "Service Authorization" has been moved to Chapter 400 Support Coordination.

904.1 Resolution of Emergency Situations

- Previously titled "Support Coordinator Authorization".
 - "Support Coordinator Authorization" has been moved to Chapter 400 Support Coordination.

904.2 Qualified Vender Request for Informal Review

- Previously titled "Other District Authorizations".

Other Authorizations

- Previously Section 904.3
 - "Other Authorizations" has been moved to Chapter 400 Support Coordination.

905 Referral and Placement in Services

- Previously titled "Cost Effectiveness Studies (CES)"
 - "Cost Effectiveness Studies" has been incorporated into Chapter 400 Support Coordination.

Individual Acute Care Card

- Previously section 908.1
 - This Section has been moved to Chapter 600 Services Contracted Health Plans.

Health Plan Responsibilities

- Previously section 908.2
 - This Section has been moved to Chapter 600 Services Contracted Health Plans.

Comprehensive Medical and Dental Program

- Previously section 908.3
 - This section has been moved to Chapter 600 Services Contracted Health Plans.

909 Residential Placement for Educational Reasons

- Previously titled "Out of Area Service"
 - "Out of Area Service" has been moved to Chapter 600 Services Out of Area Coverage.

Coordination with Other Programs and Agencies

- Previously section 912 – 912.4.1
 - This information has been moved to Chapter 400 Support Coordination.

Children’s Rehabilitative Services (CRS)

- Previously section 912.6
 - This information has been moved to Chapter 600 Services.

Removed:

903 Use of Community Resources

- “Use of Community Resources” has been removed from Chapter.
 - Information removed from this Chapter is addressed in training.

910 Case Transfer

- Removed from policy.
 - Case Transfer information removed from this Chapter is now available as an internal procedure.

1000-Plan Monitoring

Revisions:

This Chapter has been renumbered.

1001 Overview

- Revision made for conformity.

1002 Plan Review Elements

- Previously titled “Plan Reviews (Individual Support Plan/Individualized Family Services Plan Reviews).
 - “Plan Reviews” information has been incorporated into Chapter 400 Support Coordination.

Plan Review (Individual Support Plan/Individualized Family Services Plan review) Frequency

- Previously section 1002.1
 - Plan Review Frequency has been incorporated in Chapter 400 Support Coordination.
 - Revisions made for clarity and correction.

Plan Review (Individual Support Plan/Individualized Family Services Plan review) Location

- Previously section 1002.2
 - Plan Review Location has been incorporated into Chapter 400 Support Coordination.
 - Revisions made for clarity and correction.

Plan Review Participants

- Previously section 1002.3.
 - Plan Review Participants has been incorporated in Chapter 400 Support Coordination.

1003 Plan Review (Individual Support Plan/Individualized Family Services Plan review) Documentation

- Previously titled "Arizona Long Term care (ALTCS) Non-Users"
 - Plan Review Documentation has been moved to Chapter 400 Support Coordination.

Mandatory Reporting of Abuse/Neglect

- Previously section 1004
 - Mandatory Reporting of Abuse/Neglect has been moved to Chapter 400 Support Coordination.

Quality Assurance Responsibilities

- Previously section 1005
 - Quality Assurance Responsibilities has been moved to Chapter 400 Support Coordination.

Chapter 1100-Reserved

- Previously titled "Case Closure"
 - "Case Closure" has been moved to Chapter 400 Support Coordination.

Chapter 2100-Incident Management

Revisions:

- This chapter has been renumbered.
- Risk Incident Management System (RIMS) changed to Incident Management System.

2101 Overview

- Revision made for conformity.

2102 Definitions of Incidents and Serious Incidents

- Revisions made for clarity.

2103 Incident Management System (IMS) Definitions

- Previously titled "Risk Incident Management System (RIMS) Definitions.
- Revisions made for clarity and conformity with current practice.

2104 Reporting Requirements

- Revisions made for clarity.

2105 Members At Risk If Missing

- Previously titled "Reporting Forms".
- Administrative Directive 86 (Protocol for Clients Who Are at High Risk If Missing) incorporated into this Chapter/Section.
- NEW REQUIREMENT: Any deviation from this policy requires prior approval from the Division's Assistant Director/designee.

2106 Incident Reports

- Previously titled "Fact Finding, Investigations and reporting to Other Appropriate Agencies".
- Revisions made for clarity.

2107 Fact-Finding

- Previously titled "Qualified Review/Investigative Staff."
- Policy Alert from October 2013 has been included in this section.
 - *Service providers shall ensure that any service provider worker alleged to have endangered the health or safety of an individual shall not have direct contact with any individual served by the Division, pending the outcome of the Division's fact finding activities.*
- Revisions and insertions made for clarity and conformity with current practice.

2108 Abuse and Neglect

- Previously titled "Referral to Other Investigative Agencies".
- Abuse and Neglect moved to this Section from Chapter 2000 Abuse and Neglect.
- Revisions made for correction.

2109 Referral to Other Investigative Agencies

- Previously titled "Incident Closure and Corrective Actions".
- "Referral to Other Investigative Agencies" has been moved from Section 2108 of this Chapter.

2110 Incident Closure and Corrective Actions

- Previously titled "Trending for Quality Improvement".
 - Information moved to this Section from Section 2109.
- Revisions made for clarity.

2111 Trending for Quality Improvement

- Previously titled "Information Sharing".
 - Information moved to this Section from Section 2110.
- Revisions made for clarity.

2112 Information Sharing

- Previously titled "Audits".
 - Information moved to this Section from Section 2111.
- Revisions made for clarity.

2113 Mortality Review Audits

- Previously titled "Mortality Review Process".
- This Section has been re-named and moved to this Section from Section 2112.
- Revisions made for clarity.

2114 Mortality Review Process

- Previously titled "Fraud and False Claims".

- Information moved to this Section from Section 2113.
- Revisions made for clarity and conformity.

2115 Fraud and False Claims

- Information moved to this Section from Section 2114.
- Revisions made for clarity.

Chapter 2200-Grievance and Appeals Process

Revisions:

- "Office of Administrative Review" changed to "Office of Compliance and Review".
- Floor and Suite number changed for the Office of Compliance and Review.

Administrative Directives

Removed:

Directive 42 Master File Format

- This information is now an internal procedure.

Directive 60 Assisted Living Center Guidelines

- This information has been moved to Chapter 600 Services.

Directive 86 Protocol for Clients Who Are at High Risk If Missing

- This information has been moved to Chapter 2100 Incident Management.

Directive 110 Qualified Vendor Approval Process

- This information will be an internal procedure for Division staff.

Training will be updated, as appropriate.

Please contact the [Policy Unit](#) if you have any questions.

Thank you,
Stefanie Schwartz-Jacobs
Policy Manager

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Policy Notification

Revision Effective Date: August 30, 2013

Highlights of this revision:

The Division has made revisions to the Policy Manual for clarification, correction, and conformity with AHCCCS requirements. Additionally, AHCCCS recommendations from a recent policy review have been incorporated. If the change has any impact on Division operations, the impact is noted.

Entire Policy Manual

Hyperlinks were updated as appropriate.

Corrections of grammatical errors are not shown as revisions.

Table of Contents will be revised as necessary and only shown in the posted version of the Chapters listed below.

Chapter 200 - Administration

Current chapter has been removed and will be replaced with definitions in a future policy revision. Relevant content of this chapter will be incorporated in other chapters in future revisions.

Chapter 300 – Interface with Other Agencies/Programs

The information in this chapter is obsolete and has been removed.

Chapter 400 – Support Coordination

Revisions:

402 Role of the Support Coordinator

- Revision made for correction

402.6 Case Closure

- Revision made for correction

407.1 Individuals Eligible for Targeted Support Coordination

- Revision made for clarification

Chapter 500 – Eligibility

Revisions:

Entire Chapter: Changed “Cognitive Disability” to “Cognitive/Intellectual Disability”

502.2 Application Process

- Revision made for clarity

502.4 Diagnostic and Functional Criteria for Persons Age 6 and Above - Cognitive/Intellectual Disability

- Revisions made for clarity

502.4 Diagnostic and Functional Criteria for Persons Age 6 and Above – Autism

- Removed requirement for Medical Director to review diagnostic evaluations completed by a developmental pediatrician.

502.4 Diagnostic and Functional Criteria for Persons Age 6 and Above – Exemption from Eligibility

- Revision made for clarity

Chapter 600 - Services

Revisions:

601 Overview

- Revision made for correction

601.1 Family Members as Paid Providers

- Revision made for clarification
- As a result of one revision in this section, Guardians (appointed by the court) for children under the age of 18 may be paid to provide services.

- The circumstances for a family member to be paid to provide supports and services no longer apply. **The underlined language has been removed:**

For a family member to be paid to provide supports and services the individual must have medical or physical needs and one of the following circumstances must exist:

1. The family member has been paid previously as the provider.
2. The individual was living in an adult developmental home, group home, Intermediate Care Facility for Persons with an Intellectual Disability (ICF/ID), nursing facility or other out of home placement and if assessed as appropriate, with supports and services, he/she will be able to return home.
3. The individual was already receiving in-home supports and services and a family member who is working, wishes to stop working and provide the supports and services for pay. The Division considers this manner of service provision as a change in employment.

603 Acute Service Delivery

- Revision made for conformity

Added:

Appendix D Skilled Nursing Matrix

- Added for clarification

Chapter 700 - Assessment

Revisions:

706 Preadmission Screening (PAS)

- Revision made for correction

707.2 State Agreement Requirements

- Revision made for correction

Chapter 800 – Plan Development

Revisions:

803.2 Risk Assessment Plan

- Revision made for clarification

803.3 Contingency Plan (Back-up Plans)

- Revision made for clarification

808.2 Annual ISP/IFSP Planning Team Meetings

- Revision made for clarification

Chapter 900 – Plan Coordination

Revisions:

904.1 Support Coordinator Authorization

- Revision made for correction
- This revision requires any identified service to be **provided** within 30 days of eligibility.

904.4 Short Term Emergency Situations (Title Only)

- Revision made for clarification

908 Coordination of Care between Division and Health Plan

- Revision made for correction

908.2 Health Plan Responsibilities

- Revision made for correction

908.4.2 Covered Services

- Revision made for clarification

912.6 Children's Rehabilitative Services (CRS)

- Revision made for correction and clarification

Removed:

905.1 Request to Exceed Institutional Rate – Policy obsolete

Chapter 1000 – Plan Monitoring

Revisions:

1002.1 Plan Review Frequency

- Revision made for correction
- Individuals who are DD only and receive HCBS services will now be on a 90 day review cycle.

1002.1.1 Targeted Eligible Individuals

- Revision made for correction
- Individuals who are Targeted and receive HCBS services will now be on a 90 day review cycle.

Chapter 1400 – Special Programs

Revisions:

1403.3 Covered Behavioral Health Services

- Revisions made for clarification

1403.5 Support Coordination/Case Management

- Revisions made for clarification

1403.6 Treatment Planning

- Revisions made for clarification

1403.7 Certification and Recertification of Need for Inpatient Psychiatric Services

- Revisions made for clarification

1403.11 Behavioral Health Quality Management

- Revisions made for clarification

Removed:

1402 Ventilator Dependent – Policy obsolete

1403.2 Behavioral Health Definitions

Chapter 1500 – Individual Rights and Responsibilities

Revisions:

1504 – 1504.4 Health Care Directives/Advance Directives (AHCD)

- Revisions made for correction and clarification

Chapter 1800 – Records Management

Revisions:

1802.2 Confidentiality Officer

- Revisions made for clarification

Chapter 2200 – Grievance and Appeals Process

Revisions:

Entire Chapter - “Office of Compliance and Review” to “Office of Administrative Review”; including physical/ mailing address.

2208 ALTCS Notice of Action

- Revisions made for clarification

Chapter 2300 – Program Oversight

Added:

2303.6 ALTCS Administrator/Specialists

- Audit process added for clarification

Chapter 2500 – Automated Systems

The information in this chapter is obsolete and has been removed.

Please contact the [Policy Unit](#) if you have any questions.

Thanks,
Stefanie Schwartz-Jacobs
Policy Manager

Division of Developmental Disabilities

Policy Notification

TO: DDD Staff
FROM: Stefanie Schwartz-Jacobs, Policy Manager
SUBJECT: Chapter 600, 900, and Administrative Directives

Revision Effective Date: March 1, 2013

Highlights of this revision:

Chapter 600

Attendant Care

- Adds criteria for Attendant Care Supervision in Appendix A-C.
- Adds criteria for a spouse as a paid provider; replaces Administrative Directive #116.
- Removes Person Centered Plan requirement for individuals age 18 – 25; a personal interview is still required.
- Adds “Responsible Person’s Participation” section

Habilitation

- Removes 2-hour limit.

Intensive Behavioral Treatment (Habilitation Behavioral Masters and Bachelors)

- Clarifies number of hours and the time frame for authorization.
- Adds tasks the provider is required to complete.
- Clarifies responsibility of the hourly habilitation provider.
- Adds “Responsible Person’s Participation” section
- Replaces Administrative Directive #114, see Chapter 600:609.

Therapy

- Adds “Responsible Person’s Participation” section

Chapter 900

Waiting List – Section 906

- This information is obsolete and has been removed.

Administrative Directives

Therapeutic Leave Bedhold – Administrative Directive #47

- Replaces Administrative Directive #47, see Chapter 600:6023.9 and 602.10.

Emergency Alert – Administrative Directive #96

- Replaces Administrative Directive #96, see Chapter 600:608.

Extended Employment Services – Administrative Directive #81

- This information is obsolete and has been removed.

Transitional Waiver Program – Administrative Directive #94

- This information is available in the Overview of Chapter 600 and has been removed.

Please contact the [Policy Unit](#) if you have any comments/questions.

Thanks,
Stefanie Schwartz-Jacobs
Policy Manager

Division of Developmental Disabilities

Policy Notification

TO: DDD Staff
FROM: Stefanie Schwartz-Jacobs, Policy Manager
SUBJECT: **Chapters 1200 – Payment for Services, 2300 – Program Oversight**

Revision Effective Date: April 2012

Description:

Chapter 1200

Revised to include information on Hardship Requests.

Chapter 2300

Revised to remove procedures and include information regarding program and contract monitoring.

Revision Highlights:

The following Administrative and/or Policy Directives have been incorporated into this chapter:

Chapter 1200

Directives 85 – “Changes to the Schedule of Financial Contribution for State-Funded Service Recipients” & 110 – “Qualified Vendor Approval Process”

Chapter 2300

Directive 87 – “Program and Contract Monitoring Corrective Action Plans”

For more information: Please contact DDD Policy Unit at [DDDPolicy](#).

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Policy Notification

TO: DDD Staff
FROM: Stefanie Schwartz-Jacobs, Policy Manager
SUBJECT: Change in Terms within Existing Division Policy

Revision Effective Date September 30, 2011

Description: Recent legislation (House Bill 2213) changed the term “mental retardation” to “intellectual disability” throughout Arizona Revised Statutes. The law also changes Special Education Classifications to mild, moderate, profound or severe “intellectual disability”.

References to “Intermediate Care Facility for the Mentally Retarded” will change to “Intermediate Care Facility for Persons with Intellectual Disabilities”. The acronym “ICF” may be used when referring to an Intermediate Care Facility for Persons with Intellectual Disabilities.

Division statute continues to use the term “cognitive disability” which has the same meaning as “intellectual disability”. These terms can be used interchangeably and will be reflected in policy as “cognitive/intellectual disability”.

Highlights of this revision:

The following Administrative and/or Policy Directives have been incorporated into this chapter:

Not applicable

The following Guidelines support this chapter:

Not applicable

For more information: Please contact DDD Policy Unit at DDDPolicy.

THANK YOU!