



Division of Developmental Disabilities

POLICY REVISION HISTORY

DDD Medical Manual

September 30, 2020		November 29, 2018
September 2, 2020		October 1, 2018
July 29, 2020		August 22, 2018
April 22, 2020		August 1, 2018
March 4, 2020		June 13, 2018
January 15, 2020		May 23, 2018
December 18, 2019		November 22, 2017
October 1, 2019		November 17, 2017
September 25, 2019		September 15, 2017
September 11, 2019		August 15, 2017
July 3, 2019		May 5, 2017
May 8, 2019		March 3, 2017
April 24, 2019		October 14, 2016
May 8, 2019		July 15, 2016
		June 10, 2016
		May 27, 2016
		May 13, 2016
		April 1, 2016
		March 25, 2016
		February 26, 2016
		January 29, 2016
		October 8, 2015

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

DDD 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 [Policy & Rules](#) screen on the Division's website.

Revised Policy:

[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.
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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
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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 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.

1000 - Chapter Overview

This is a revised policy that applies to Medical Management Chapter Overview. The standards and requirements included in this chapter are applicable to the Division of Developmental Disabilities (Division) and its Administrative Services Subcontractors (AdSS). It provides the necessary information to the Division and AdSS to ensure compliance with federal, state, and AHCCCS requirements to Medical Management activities.

Revisions:

- General formatting updates and section movement to align with policy template.
- Monitoring Section point G: Changed language of “Medical Director (unless delegated to an associate Medical Director)” and replaced with current policy language “Chief Medical Officer or designated Medical Director”.
- Care Management Definition: Language for “Contractor” changed to AdSS.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Medical Policy Manual Notification

Approval Date: 08/20/2020

Revision 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.

Revised Policy:

QM 960, Tracking and Trending of Member and Provider Issues

Revision Details

- Added Purpose Section: This policy establishes standards and requirements for the tracking and trending of member and provider issues.
- Added Definition Section and definitions related to policy content
- Documentation Related to Quality of Care Concerns Section:
 - Added new language point D for to align with AHCCCS AMPM Policy 960
 - Added citations and references at end of section
- Process of Evaluation and Resolution of Quality of Care and Service Concerns Section:
 - B4a: Added language to align with AHCCCS AMPM 960
 - E: Added language to align with AHCCCS AMPM 960, as applicable
 - J: Added language to align with AHCCCS AMPM 960, as applicable
 - M: Added language to align with AHCCCS AMPM 960, as applicable
 - 03: Added language to align with AHCCCS AMPM 960, as applicable
 - P: Added language to align with AHCCCS AMPM 960, as applicable
- Requests for Copies of Death Certificates Section:

- Pt A, C and E: Added language for clarity and to align with AHCCCS Policy 960, as applicable
- Reporting to Independent Oversight Committee Section:
 - Added new section to align with AHCCCS AMPM 960, as applicable
 - Updated phrasing from Human Rights Committee to Independent Oversight Committee
- Requests for Protected Health Information (PHI) of a Currently Enrolled Member Section:
 - Added new section to align with AHCCCS AMPM 960, as applicable
- Duties and Liabilities of Behavioral Health Providers in Providing Behavioral Health Services Section:
 - Added new section to align with AHCCCS AMPM 960, as applicable
- Tracking and Trending of Quality Care Issues Section:
 - C: Added term “designated Medical Director”
 - D: Added reference language and name of attachment A; changed 60 days to 45 days to align with AHCCCS.
 - F: Added Reference to AMPM 960 and language to align with AMPM 960, as applicable.
- Provider-Preventable Conditions Section:
 - Removed language due to duplicative to terms in definition section.
 - A: Added citation 42 CFR 447.26

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Division of Developmental Disabilities

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.

Revised Policy:

MM 1010, Medical Management Administrative Requirements

Reason for changes: Operational Review policy changes needed to align with AHCCCS policies and meet contractual obligations.

Impact to members: none

Impact to providers: none

This is a revised policy that applies to Medical Management Administrative Requirements

- Added a purpose section language: This policy outlines the Medical Management administrative requirements.
- Added a definition section and a definition for Plan-Do-Study- Act (PDSA) Method.
- Medical Management Plan section:
 - C2: Changed Medical Director to Chief Medical Officer (unless delegated to an associate Medical Director) throughout policy
- Medical Management Administrative Oversight section:
 - N2: Changed 42 CFR 438.406(a)(3) to 42 CFR 438.406(a)(2)(i)
 - N6: added language: "criteria" and added "90%" for inter-rater reliability standards percentage
 - P2: added AHCCCS policy reference ACOM Policy 438
 - P3: added language: "annually" relate to frequency of a formal review

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Division of Developmental Disabilities

Medical Policy Manual Notification

Approval Date: 07/29/2020

Revision Effective Date: 07/29/2020

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Revised Policy:

970, Performance Measures

Reason for changes: OR Review determined policy changes to align with AHCCCS policy and to meet contractual obligations to delivery of care and services to members.

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

- Added References to reflect policy and statute cited within the policy
- Added definition section and definitions related to policy content
- Updated Purpose section:
 - To reflect performance measures contractual requirements
 - State the Division's monitoring of AdSS metric reporting for compliance of AdSS' responsibility to improve performance measures
- Policy Overview section added to outline the Division's responsibility related to ongoing data collection, monitoring, and evaluation performance metric data to create measurable goals to enhance the Divisions' Quality Management/Performance Improvement Program.

- Performance Measurement Requirements section updated:
 - B2: Removed Attachment C and replaced with adhering to AMPM Policy 920-Attachment B, AHCCCS Quality Improvement CAP Contractor Checklist
 - B3: Added: and include a list of activities and/or strategies to allocate increased administrative resources to improve rates for a specific measure or service area.
- Added Performance Measures Analysis Section to demonstrate how the Division conducts data analysis related to performance measurements to improve quality of care to members and identify improvements and targeted interventions; and evaluate aggregate and subpopulation performance.
- Added an Inter-Rater Reliability Section to describe how the Division ensure data collection reliability.
- Added a Performance Metric and Measure Reporting Section to explain the Division's performance metric measurements and reporting responsibilities.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

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.

Revised Policy:

980, Performance Improvement Projects

Reason for changes: Operational Review policy changes needed to align with AHCCCS policies and to meet contractual obligations.

This is a revised policy related to the Division's participation and oversight in Performance Improvement Projects (PIPs) selected by AHCCCS in accordance with standardized methodology and performance improvement projects mandated by Centers for Medicare and Medicaid Services (CMS) in consultation with AHCCCS, other states, and other stakeholders.

Revised Policy

- Added references to reflect policy and statute cited within the policy
- Added definition section and definitions related to policy content
- Changed Overview to Purpose and added:
 - This also includes those members receiving Long Term Care Services and Supports (LTSS) [42 CFR 438.330].
 - In addition, the Division oversees Administrative Services Subcontractors (AdSS) for compliance with these requirements during an annual operational review of each AdSS.
 - 42 CFR 438.330 (a)(2)

- Added Language to the Performance Improvement Projects Design section:
 - Section A:
 - added language to address Division's responsibility to conduct PIPs and describe focus areas
 - added language and citation: PIPs are developed according to 42 CFR 438.330
 - Added language around the Division's use of protocol AMPM Policy 980 - Attachment A, Protocol for Conducting Performance Improvement Projects
 - Added language: when monitoring compliance with these requirements by each AdSS, the Division's expectation is use of this same protocol
 - Section D: Added language
 - D3: Primary, secondary, and/or tertiary prevention of behavioral health conditions
 - D7: Care of behavioral health conditions
 - G: The Division will use the Plan-Do-Study-Act (PDSA) testing method to identify changes. This method will identify the changes quickly and refine them, as necessary
- Added new section: Inter-Rater Reliability related to the collection of data to measure performance for AHCCC-mandated PIPs.
- Added new section: Performance Improvement Projects Reporting Requirements to outline AHCCCS policy requirements and contractual obligations.

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Division of Developmental Disabilities

Operations 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 to the Policy:

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

The definition for Natural Support was removed.

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

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Division of Developmental Disabilities

Medical Policy Manual Notification

Date: 3/4/2020

Revision Effective Date: 3/4/2020

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 [Policies & Rules](#) screen on the Division's website.

Revised Policy

1250-E, Therapies (Rehabilitative Habilitative)

Policy Description: The policy describes how the Division directs member participation in habilitative and/or rehabilitative therapies to improve functional skills – examples include Occupational, Physical and Speech therapies.

Revision: *To clarify the language concerning Therapy Services which require a prescription for an evaluation, will also require a Plan of Care as part of the process.*

- Therapy services require a prescription for an evaluation and a certified plan of care for ongoing therapy services, are provided or supervised by a licensed therapist, and are not intended to be long-term services.
-

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Division of Developmental Disabilities

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.

Revised Policy:

320 M. Medical Marijuana and CBD Oil Products

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

Updated:

- Updated policy to align with AHCCCS recent revisions.
- Added "CBD Oil product" topic to the policy explaining the coverage and reimbursement guidelines.
- Revised policy formatting.

Please send any questions to DDDPolicy@azdes.gov.
Division of Developmental Disabilities
Medical Policy Manual Notification

Date: 12/18/2018

Revision Effective Date: 12/18/2019

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 [Policy & Rules](#) screen on the Division's website.

Revision Policy:

960 Tracking and Trending of Member and Provider Issues

- This policy was revised to add language regarding the right of the Division's members to refuse an interview conducted by Law Enforcement.
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Revised Policy:

1250-D Respite

- Removed the word "unpaid"
 - Removed phrase, "*Respite services can only be provided for children ages 0 to 3 related to required training for the primary caregiver. This training requirement must be documented in the Individualized Family Services Plan (IFSP).*" It was determined that the requirement does not apply to the Division.
-

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Division of Developmental Disabilities
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 [Policy & Rules](#) 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:

410 Maternity Care Services

- This policy was revised to comply with AHCCCS policy updates and 10/1/19 integration.

420 Family Planning

- This policy was revised to comply with AHCCCS policy updates and 10/1/19 integration.

430 Early and Periodic Screening, Diagnostic and Treatment Service

- This policy was revised to comply with AHCCCS policy updates and 10/1/19 integration.

New Policies:

310-FF Monitoring Controlled and Non-Controlled Medication Utilization

- New policy with delegation statement to AdSS policy.

320-P Serious Mental Illness Eligibility

- New policy with delegation statement to AdSS policy.

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

- New policy with delegation statement to AdSS policy.

541 Coordination of Care with Other Government Agencies

- New policy outlining the requirements of the Division to develop and maintain collaborative relationships with other government entities that deliver services to members and families, ensure access to services, and coordinate care with consistent quality.

570 (Reserved) Community Collaborative Care Teams

- This policy is being reserved due to 10/1/19 integration activities; collaboration will no longer be needed as defined in the previous policy.
-

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Division of Developmental Disabilities

Medical Policy Manual Notification

Date: 9/25/19

Revision Effective Date: 9/25/19

Revised Policy

680-C Pre-Admission Screening and Resident Review

Reason for changes: AHCCCS Compliance, policy number changed from 1220-C to 680-C; new procedure established

Impact to members: None

Impact to providers: None

Revision: New policy number; general revisions for purposes of clarification, updating and formatting; new procedure established.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Medical Policy Manual Notification

Date: 09/11/2019

Revision Effective Date: 9/11/2019

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:

1240-E. Habilitation Services

Policy Description: This is a revised policy that applies to Qualified Vendors for the Division of Developmental Disabilities. This policy was updated with new information responding to AHCCCS request for compliance regarding Career Preparation and Readiness.

Revision:

- Added section regarding Career Preparation and Readiness services. This section provides a description of the services for Division Member's.
-

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Division of Developmental Disabilities

Medical Policy Manual Notification

Date: July 3, 2019

Revision Effective Date: July 3, 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 [Policy & Rules](#) screen on the Division's website.

Revised Policies:

411 – Women's Preventative Care Services

- Minor editing; stated that the HPV vaccine is part of Well-Woman Preventative Care Services for children age 9 or 10 in a high-risk situation.
-

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

Medical Policy Manual Notification

Date: May 8, 2019

Revision Effective Date: May 8, 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 [Policy & Rules](#) screen on the Division's website.

Revised Policies:

310-J, Hospice Services

- Changes made to reflect AMPM 310-J. Defined Bereavement Counseling and Palliative Care. Stated that Hospice Services are covered for terminally ill members who meet specified medical criteria and requirements under A.R.S. §§ 36-2907, 36-2939, and 36-2989, and 42 CFR Part 418 et seq. Stated eligibility requirements, defined hospice services and location of where such services may be provided. Required that hospice agencies that cannot provide/cover medically necessary services must report such cases to ADHS.
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Please send any questions to DDDPolicy@azdes.gov.
Division of Developmental Disabilities

Medical Policy Manual Notification

Date: April 24, 2019

Revision Effective Date: April 24, 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 [Policy & Rules](#) screen on the Division's website.

New Policies:

320-V, Behavioral Health Residential Facilities

- New policy to reflect AHCCCS Medical Policy 1230-B. This policy establishes requirements for the provision of care and services in a Behavioral Health Residential Facility.

Revised Policies:

310-M, Immunizations

- Changed to reflect revisions to AMPM 310-M:
 - Prior authorization is not required for medically necessary covered immunizations when administered by an AHCCCS-registered provider
 - Zoster vaccine is covered for members over 50 years old
 - HPV vaccine is available through 26 years of age
 - Immunizations are not covered for travel outside of the United States
 - Pharmacy reimbursement for adult immunizations is covered under AMPM 310-V.
-

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Division of Developmental Disabilities

Medical Policy Manual Notification

Date: November 29, 2018

Revision Effective Date: November 29, 2018

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 Policies:

310-K, Hospital Inpatient Services

- This policy was revised to reflect additions to AHCCCS policy; the additions included identification of the following as inpatient hospital services: acute physical care, behavioral health care, medical detoxification/treatment services, and behavioral health forensic services. In addition, the following ancillary services were identified: audiology services, dental surgery for members 21 years of age and older (within limitations) and behavioral health assessments.
-

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

Medical Policy Manual Notification

Date: October 1, 2018

Revision Effective Date: October 1, 2018

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 Policies:

1040, Outreach, Engagement, Reengagement, and Closure for Behavioral Health

This is a new policy that applies to the Division and Qualified Vendors. It will adequately provide guidance and specific information on the development of outreach, engagement, reengagement, and closure for behavioral Health. The policy will address specific roles for the Division and Qualified Vendors to efficiently serve the Member's with behavioral health needs.

Revised Policies:

330, Children's Rehabilitative Services

- Revised policy was expanded to include detailed description of the CRS Program including definitions and descriptions of services provided

Retired Policies:

310-U, Foot and Ankle Services (Retired)

- Policy 310-U, Foot and Ankle Services, has been retired to comport with A.R.S. § 36-2907, which states that podiatry services are covered when they are performed by a podiatrist who is licensed pursuant to title 32, chapter 7 and ordered by a primary care physician or primary care practitioner. AHCCCS Medical Policy Manual Policy 310-U has also been retired.
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Division of Developmental Disabilities

Medical Policy Manual Notification

Date: August 15, 2018

Revision Effective Date: August 22, 2018

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 Policies:

410, Maternity Care Services

- Language was expanded to ensure all requirements in AHCCCS Medical Policy 410 are outlined.
- Language regarding pregnancy termination was revised to ensure compliance with AHCCCS Medical Policy 410 language.

420, Family Planning

- Policy was expanded to ensure all requirements in AHCCCS Medical Policy 420 are outlined.
 - Added language regarding educating providers on family planning options.
 - Added language regarding exclusions for sterilization.
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Division of Developmental Disabilities

Medical Policy Manual Notification

Date: August 1, 2018

Revision Effective Date: August 1, 2018

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 Policies:

920, Quality Management/Performance Improvement (QM/PI) Program Scope

- Inserted "or suspected" in the following text: "The Division actively participates in both individual and coordinated efforts to improve the quality of care by taking appropriate action regarding... 4. Scheduled and unscheduled monitoring of placement setting or service sites that are in an Immediate Jeopardy status or have serious identified *or suspected* deficiencies that may affect health and safety of members (Immediate Care Needs).
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Division of Developmental Disabilities

Medical Policy Manual Notification

Date: June 13, 2018

Revision Effective Date: June 13, 2018

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 Policy:

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

- Removes language stating Augmentative Communication Devices must be returned to the Division if the member is moving out of state. Added language that the member keeps the device if they move out of state.
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Division of Developmental Disabilities
Medical Policy Manual Notification

Date: May 23, 2018

Revision Effective Date: May 23, 2018

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 [Oversight & Policy](#) screen on the Division's website.

Revised Policy:

950. Credentialing and Recredentialing Processes.

- Clarified credentialing requirements, indicating the primary sources for verification.
 - Adult/Child Developmental Homes, Day/Employment Programs, and Therapies were added to the list of Organizational Providers. It was determined these providers met the requirements for Organizational Providers.
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Division of Developmental Disabilities
Medical Policy Manual Notification

Date: November 22, 2017

Revision Effective Date: November 22, 2017

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The policies identified below may be viewed by accessing the [Oversight & Policy](#) screen on the Division's website.

New Policies

Historically the Division has used AHCCCS policies and the Division's contract with AHCCCS to inform staff, providers, and stakeholders of the Division's requirements not available in the policy manual. Using this method, it became apparent that there was confusion as to what applied to the Division and what did not apply; the Division implemented a plan to resolve this confusion. This revision is the third phase of this plan, formally documenting current practices in the Medical Policy Manual.

431, Oral Health Care (EPSDT-Age Members)

- Explains Division coverage of oral health care for EPSDT-age members. Specifically, it explains oral health screenings, fluoride varnish application, Administrative Services Subcontractor (AdSS) and dental home obligations to the member, covered services, AdSS Dental Annual Plan requirements, and member consents to treatment.

1030, Reporting Requirements

- States requirement that the AdSS must submit reports to the Division within the timeframe indicated in the Contract, Exhibit C, and Amendments.
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Revised Policies

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

530 Member Transfers Between Facilities

- This policy was revised to define the conditions under which members may be transferred from one hospital another hospital or to a “lesser level of care facility.”

1000 Chapter Overview

- This Chapter Overview was revised to state that:
 - The chapter applies to the Division and its AdSSs.
 - The Division will conduct reviews to verify AdSS compliance.
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Division of Developmental Disabilities
Medical Policy Manual Notification

Date: November 17, 2017

Revision Effective Date: November 17, 2017

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310-J Hospice Services

- Explains the hospice services available to members and the Division requirements of hospice providers regarding the provision of these services.

310-L Hysterectomy

- Explains the conditions under which the Division covers and does not cover hysterectomies.

310-M Immunizations

- Explains scope of Division coverage for immunizations.

310-AA Total Parenteral Nutrition (TPN)

- Explains scope of Division coverage for parenteral nutrition; it states that the Division follows Medicare guidelines for the provision of these services, and it states who is eligible to receive these services.

320-F HIV/AIDS Treatment Services

- Explains Division coverage of HIV/AIDS treatment services, defines a “qualified HIV/AIDS treatment professional,” and explains Administrative Service Subcontractor responsibilities in providing access to treatment, the treatment itself, the development of policies and procedures, and member choice.

610 AHCCCS Provider Qualifications

- Explains Division requirements regarding provider registration with AHCCCS and compliance with law, rules, regulations, executive orders, and agency policies. This policy also directs prospective providers to the location of required AHCCCS registration forms.

640 Advance Directives

- Explains the Division’s minimum requirements that Administrative Services Subcontractor providers must meet in regard to members’ rights and abilities to direct their own medical care.
-

Revised Policies

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

310-F Emergency Medical Services

- This policy was revised to provide greater clarity and detail, consistent with AHCCCS Policy 310-F.

310-K Hospital Inpatient Services

- This policy is revised to include information previously covered by the corresponding AHCCCS policy.

310-U Foot and Ankle Services

- The name of this policy was changed from “Podiatry” to “Foot and Ankle Services” for clarity.
- This policy was revised to explain specifically what medically necessary foot and ankle care services are covered by the Division.

310-BB Transportation

- This policy was revised to define the specific conditions under which emergency/non-emergency medical transportation is covered, and to explain the specific types of covered medical transportation services.

320-E Health and Behavior Intervention

- This is a revised policy that identifies CPT codes used to identify and treat psychological, behavioral, emotional, cognitive, and social factors important to the prevention, treatment, and management of physical health problems.

320-I Telehealth and Telemedicine

- This policy was revised to include a Definitions section, explain exceptions to the Division's non-coverage of the use of services delivered via telecommunications, and explain other conditions, limitations, and exclusions.

550 Member Records and Confidentiality

- Revised policy to define the responsibilities of Administrative Services Subcontractors and providers regarding the protection of information regarding members of the Division.

970 Performance Measures

- Added "The Division provides oversight sufficient to ensure compliance with all AHCCCS requirements when performance measure activities fall under delegated duties."

980 Performance Improvement Projects

- Added "The Division conducts oversight sufficient to confirm that AHCCCS mandated PIPs are implemented appropriately meeting all requirements when such projects fall under delegated duties."
-

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Medical Policy Manual Notification

Date: September 15, 2017

Revision Effective Date: September 15, 2017

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:

1240-E – Habilitation Services

- Added a section to define and explain Habilitation Consultation. This is a new service based on the use of evidence-based practice. It is available to all ALTCS members with any of the Division's qualifying diagnoses (not limited to Autism/Autism Spectrum Disorder). This service covers member from three years old to 22 years old.
 - Stated that Day Treatment and Training may not be appropriate for children aged birth to 48 months and that the District Program Manager/designee approval would be required; defined services and settings for other age groups
 - Stated that the Division supports Employment First policy and practice, and define Transition to Employment
 - Completely rewrote Habilitation Early Childhood Autism Specialized section for clarity and to increase maximum age for eligibility determination from four years old to five years old.
-

Please send any questions to DDDPolicy@azdes.gov.
Division of Developmental Disabilities
Medical Policy Manual Notification

Date: August 15, 2017

Revision Effective Date: August 15, 2017

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:

1210 Institutional Services and Settings

This policy has been rewritten by a team of Subject Matter Experts and submitted for public comment. Changes include the addition of:

- References to the Code of Federal Regulations upon which Division policy is based
- Clarifications of licensing requirements
- Clarifications regarding Nursing Facilities placed on termination status
- Restrictions on payment (to Nursing Facilities) regarding the exceeding of allowable Therapeutic Leave and bed hold days
- Requirement to reassess upon changes to member's physical or mental status
- Details regarding Planning Team Meetings and Planning Documents
- Explanation of the process by which a Support Coordinator addresses the need for a member to change living arrangements
- Clarifications of the functions of Intermediate Care Facility for Individuals with an Intellectual Disability (ICF/IID)
- Explanations of when ICF/IID services may be considered appropriate
- Explanation of what ICF/IID treatment includes and does not include
- Explanation of the development and implementation of an active treatment plan, explanation of when ICF/IID placements cannot be made.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Medical Policy Manual Notification

Date: May 5, 2017

Revision Effective Date: May 5, 2017

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 Policies:

950 Credentialing and Recredentialing Processes

- This policy was revised to reflect AHCCCS requirements, as stated in ACOM 950, more clearly and completely. It also states timeliness/process reporting requirements for Division subcontractors and simplifies credentialing timeliness standards.
-

Please send any questions to DDDPolicy@azdes.gov.
Division of Developmental Disabilities
Medical Policy Manual Notification

Date: Friday, March 3, 2017

Revision Effective Date: March 3, 2017

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 Policies:

Historically the Division has used AHCCCS policies and the Division's contract with AHCCCS to inform staff, providers, and stakeholders of the Division's requirements not available in the policy manual. Using this method, it became apparent that there was confusion as to what applied to the Division and what did not apply; the Division implemented a plan to resolve this confusion. This revision is the third phase of this plan, memorializing current practices into the Medical Policy Manual.

CHAPTER 300 MEDICAL POLICY FOR ACUTE SERVICES

310-A Audiology

- Explains scope of Division coverage for audiology services.
-

310-E Dialysis

- Explains scope of Division coverage for dialysis.
-

310-O Maternal and Child Health Services

- Explains Division coverage for maternal and child health services.
-

310-S Observation Services

- Explains scope of Division coverage for observation services.
-

310-T Physician Services

- Explains scope of Division coverage for physician services.
-

310-W Radiology and Medical Imaging

- Explains scope of Division coverage for radiology and medical imaging services.
-

310-Y, Respiratory Therapy

- Explains scope of Division coverage for respiratory therapy services.

320-A, Affiliated Practice Dental Hygienist

- Explains scope of Division coverage for oral health services performed by a dental hygienist.

320-G, Lung Volume Reduction Surgery

- Explains scope of Division coverage for Lung Volume Reduction Surgery.

320-K, Tobacco Cessation Product Policy

- Explains scope of Division coverage for tobacco cessation products.
-

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Medical Policy Manual Notification

Date: October 14, 2016

Revision Effective Date: October 14, 2016

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:

Medical Policy Manual. Policy 310-D Dental Services

- Added section name, "Dental Services for Members Aged 0-21," and in this section reversed word order in the phrase "licensed dentist" (to "dentist licensed") in "...when provided by a licensed dentist per A.R.S. § 32-1207 and A.R.S. § 32-1231 for maintenance of dental health, prevention and treatment of disease and injury, in an appropriate dental facility..." because the statutes quoted referred to licensure, not to the provision of services to members.
- Added section, "Dental Services for Members." to state what Dental services are covered for AHCCCS ALTCS members 21 years of age and older, benefit dollar limits, and benefit period.
- Added section name, "Emergency Dental Care/Extractions for ALTCS Members of All Ages" so that the previous statement regarding emergency dental care/extractions would not appear to be part of one of the newly-created age-specific sections.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Medical Policy Manual Notification

Date: July 15, 2016

Revision Effective Date: July 15, 2016

Revised Policy:

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.

CHAPTER 500 COORDINATION REQUIREMENTS:

540-OTHER CARE COORDINATION ISSUES

- Removed the word "foster" when referenced in relation to Developmental Homes. **
-

CHAPTER 900 QUALITY MANAGEMENT/PERFORMANCE IMPROVEMENT PROGRAM:

920-QUALITY MANAGEMENT/PERFORMANCE IMPROVEMENT PROGRAM (QMPI) SCOPE

- Removed the phrase "Foster Care Homes" and replaced with the words "Developmental Homes." **
-

CHAPTER 1200 SERVICES AND SETTINGS:

1210-INSTITUTIONAL SERVICES AND SETTINGS

- Updated the citation of A.R.S. § 36-591 (G) to: A.R.S. § 36-591(E). **

1230-A-ASSISTED LIVING FACILITIES

- Defined "Assisted Living Home"
- Added "The Division does not contract with Adult Foster Care Facilities" and "The Division provides Adult Development Homes in lieu of Adult Foster Homes."

1240-E-HABILITATION SERVICES

- Removed the word "Foster" when referenced in relation to Developmental Homes. **

- Added the phrase "H. When this service is authorized for a member with nursing needs all assessed medically necessary services and supports shall be provided." **

1250-D-RESPITE

- Removed the word "Foster" when referenced in relation to Developmental Homes. **
- Added the word "services" after ALTCS

1250-H-TRANSPORTATION

- Removed the word "Foster" when referenced in relation to Developmental Homes. **

**This policy was revised to comply with the 52nd Legislature, 2nd Regular Session House Bill 2099 (developmental disabilities; terminology; settings) – Chapter 286

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Medical Policy Manual Notification

Date: June 13, 2016

Revision Effective Date: June 10, 2016

Revised Policies:

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.

CHAPTER 1200

CHAPTER 1200 OVERVIEW

This revision reincorporated two paragraphs of language from the 2015 Policy Manual as the second and third paragraph.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Medical Policy Manual Notification

Date: May 31, 2016

Revision Effective Date: May 27, 2016

New Policies:

Historically the Division has used AHCCCS policies and the Division's contract with AHCCCS to inform staff, providers, and stakeholders of the Division's requirements not available in the policy manual. Using this method, it became apparent that there was confusion as to what applied to the Division and what did not apply; the Division implemented a plan to resolve this confusion. In October 2015, the Division began aligning the Division policy manuals with AHCCCS policy manuals by creating the Operations and Medical Manuals to go along with the Eligibility, Behavior Supports, and Provider Manuals. This revision is the second phase of this plan, memorializing current practices into one of the five policy manuals.

CHAPTER 400 – MEDICAL POLICY FOR MATERNAL AND CHILD HEALTH:

411 WOMEN'S PREVENTATIVE CARE SERVICES

Defined the list of covered Well-Woman Preventative Care Services, and stated that the health plans are required to cover these services for their members. The Division covers these services for members who are enrolled in the American Indian Health Plan (AIHP).

CHAPTER 900 – QUALITY MANAGEMENT AND PERFORMANCE IMPROVEMENT PROGRAM:

920 QUALITY MANAGEMENT/PERFORMANCE IMPROVEMENT (QM/PI) PROGRAM SCOPE

Defined the components of the QM/PI Program, QM/PI monitoring and evaluation activities, problems requiring corrective action, and examples of corrective actions.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Medical Policy Manual Notification

Date: May 13, 2016

Revision Effective Date: May 13, 2016

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 Policies:

Historically the Division has used AHCCCS policies and the Division's contract with AHCCCS to inform staff, providers, and stakeholders of the Division's requirements not available in the policy manual. Using this method, it became apparent that there was confusion as to what applied to the Division and what did not apply; the Division implemented a plan to resolve this confusion. In October 2015, the Division began aligning the Division policy manuals with AHCCCS policy manuals by creating the Operations and Medical Manuals to go along with the Eligibility, Behavior Supports, and Provider Manuals. This revision is the second phase of this plan, memorializing current practices into one of the five policy manuals.

CHAPTER 500 - CARE COORDINATION REQUIREMENTS:

510 PRIMARY CARE PROVIDERS

- The Division delegates this responsibility and provides oversight and monitoring to ensure subcontractor compliance.

SECTION 530 MEMBER TRANSFERS BETWEEN FACILITIES

- The Division delegates this responsibility and provides oversight and monitoring to ensure subcontractor compliance.

SECTION 550 MEMBER RECORDS AND CONFIDENTIALITY

- The Division delegates this responsibility and provides oversight and monitoring to ensure subcontractor compliance.
-

CHAPTER 800:

810 UTILIZATION MANAGEMENT OVERVIEW

- The Division delegates this responsibility and provides oversight and monitoring to ensure subcontractor compliance.

CHAPTER 900:

910 QUALITY MANAGEMENT / PERFORMANCE IMPROVEMENT PROGRAM ADMINISTRATIVE REQUIREMENTS

- This policy outlines the components, activities, and requirements of the Division's Quality Management / Performance Improvement Program (QM/PI).

950 CREDENTIALING AND RE-CREDENTIALING PROCESS

- This policy outlines the types of providers that the Division provides credentialing and recredentialing for, as well as outlines the notification requirements for suspensions, terminations, and final adverse actions. This policy also provides timeliness standards for initial credentialing, recredentialing and organizational credentialing.

970 PERFORMANCE MEASURES

- This policy outlines the performance measures to improve performance in all AHCCCS established performance measures and reports the results of these measures to the AHCCCS Clinical Quality Management on a quarterly basis.

980 PERFORMANCE IMPROVEMENT PROJECTS

- This policy discusses where the Division's performance improvement projects come from and how they are designed, measured, and concluded.

CHAPTER 1000:

1000 CHAPTER OVERVIEW

- This policy outlines the Division's processes of monitoring its subcontracted acute health plans.

1010 MEDICAL MANAGEMENT ADMINISTRATIVE REQUIREMENTS

- This policy describes the requirements of the Medical Management Plan, the Medical Management Work Plan, and the process of administrative oversight.

CHAPTER 1600:

1620-G BEHAVIORAL HEALTH STANDARDS

- This policy outlines case management of members with behavioral health needs.

1630 ADMINISTRATIVE STANDARDS

- This policy outlines the minimum requirements for Support Coordinators when hired. It also provides a list of official forms in use by the Division to document services. This policy also documents the administrative standards of: training, caseload management, accessibility, time management, supervision, inter-departmental coordination, reporting and requirements.

1640 TARGETED SUPPORT COORDINATION STANDARDS

- This policy describes Targeted Support Coordination as a covered service for members who are financially eligible for Title XIX and Title XXI acute programs who do not meet the financial requirements of eligibility for the Arizona Long Term Care System services. It outlines the role of the Support Coordinator in providing Targeted Support Coordination and supports member choice in the frequency of meetings.

Revised Policy:

CHAPTER 1200 SERVICES AND SETTINGS:

1210 INSTITUTIONAL SERVICES AND SETTINGS

- This policy incorporated sections 1210-A and 1210-B into this section.
- Added new section "Behavioral Health" which outlines the Division's collaboration with the Division of Behavioral Health Services.

CHAPTER 300

CHAPTER OVERVIEW

- The following language was added: "The services described in this Chapter are available to members enrolled in Title XIX. This includes Targeted (Title XIX Acute) and Arizona Long Term Care Services (ALTCS) members."
-

Rescinded Policy:

CHAPTER 1200 - SERVICES AND SETTINGS

1210-A INTERMEDIATE CARE FACILITIES

- This section was removed and incorporated into one section in 1210 - Institutional Services And Settings.

1210-B NURSING FACILITIES

- This section was removed and incorporated into one section in 1210 - Institutional Services And Settings.

Revision History:

The blurb regarding the incomplete posting on April 1st was removed from the revision history as it was only to appear in the revision history dated February 26th.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Medical Policy Manual Notification

Date: April 1, 2016

Revision Effective Date: April 1, 2016

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

CHAPTER 500:

520 MEMBER TRANSITIONS

This is a new policy section.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Medical Policy Manual Notification

Date: March 25th, 2016

Revision Effective Date: March 25th, 2016

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

CHAPTER 300:

[310-P MEDICAL SUPPLIES, DURABLE MEDICAL EQUIPMENT, AND PROSTHETIC DEVICES \(ACUTE CARE SERVICES\)](#)

- The second paragraph “Documentation from therapists...” was moved to the third paragraph under 2.
- The third paragraph “Experience has demonstrated...” was moved to the second paragraph under 2.
- Durable Medical Equipment (DME) was abbreviated throughout the policy
- The section “Orthotics” was added.
- Sections pertaining to adults from 430-C in the Medical Policy Manual “Incontinence Briefs” were moved from to this section.

CHAPTER 400:

[430 MEDICAL SUPPLIES, DURABLE MEDICAL EQUIPMENT, AND PROSTHETIC DEVICES \(ACUTE CARE SERVICES\)](#)

- The phrase “Limitations and exclusions, other than the requirement for medical necessity and cost effectiveness, do not apply to EPSDT services.”
- Updated the link to azahcccs.gov/regulations/laws regulations.
- Sections pertaining to “Incontinence Briefs” for members over 21 years of age were moved from this section to 310-P.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Medical Policy Manual Notification

Date: Friday, February 26, 2016

Revision Effective Date: Friday, February 26, 2016

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

CHAPTER 1200:

1210-A INTERMEDIATE CARE FACILITIES

Under Service settings, the language was changed to "State-owned or operated community residential settings, private state-licensed facilities that contract with the department." The language "on or before July 1, 1988" was removed.

1240-A ATTENDANT CARE AND HOMEMAKER (DIRECT CARE SERVICES)

General formatting and style adjustments were made including addition of "(Attendant Care)" after the description title. Corrected outline format to match style in subsection, "Service Requirements (Homemaker)."

Exhibit 1240A-3 ATTENDANT CARE SUPERVISION DOCUMENTATION REQUIREMENTS

To conform with style, the abbreviation "(ISP)" was added under "A." The word "Report" was added under "C." The word "Tool" was added under "J.," and "State Examination" was added under "K."

An incomplete posting was discovered in the January 29, 2016 posting and was corrected. It was noticed that the revisions were not updated online in each chapter of the manual; they were posted online in the complete set of manuals only. The error has been remedied.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Medical Policy Manual Notification

Date: Friday, January 29, 2016

Revision Effective Date: Friday, January 29, 2016

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

CHAPTER 400.

410 - MATERNITY CARE SERVICES

The subsection "Pregnancy Termination" was added to this section.
