

310-F EMERGENCY MEDICAL SERVICES

REVISION DATE: 9/11/2024, 10/1/2021, 11/17/2017, 7/3/2015, 9/15/2014

REVIEW DATE: 3/5/2024, 10/19/2023

EFFECTIVE DATE: June 30, 2014

REFERENCES: A.A.C. R9-22-210.

PURPOSE

This policy sets forth guidance for the Division of Developmental Disabilities (Division) coverage of physical and behavioral health emergency medical services for Members who are eligible for ALTCS and Fee-For-Service (FFS)/DDD with the Tribal Health Program (THP).

DEFINITIONS

1. "Arizona Long Term Care System" or "ALTCS" means an AHCCCS program which delivers long-term, acute, behavioral health and Case Management services as authorized by A.R.S. § 36-2931.
2. "Calendar Day" means every day of the week including weekends and holidays.
3. "Emergency Medical Condition" means an illness, injury, symptom or condition, including severe pain, that a reasonable person could expect that not getting medical attention right

away would:

- a. Put the person's health in danger;
 - b. Put a pregnant person's baby in danger;
 - c. Cause serious damage to bodily functions; or
 - d. Cause serious damage to any body organ or body part.
4. "Fee-For-Service" means a method of payment to an AHCCCS registered provider on an amount-per-service basis for services reimbursed directly by AHCCCS for Members not enrolled with a managed care Contractor.
5. "Member" means the same as "Client" as defined in A.R.S. § 36-551.
6. "Prior Authorization" means approval from a health plan that may be required before you get a service. This is not a promise that the health plan will cover the cost of the service.
7. "Triage/Emergency Medical Screening Services for Non-FES Members" means services provided by acute care hospitals, U.S. Indian Health Service/638 (IHS/638) facilities and urgent care centers to determine whether or not an emergency exists;

assessment of the severity of the Member's medical condition and determination of what services are necessary to alleviate or stabilize the emergent condition.

POLICY

A. REQUIREMENTS

1. The Division shall require emergency medical services to be covered for ALTCS Members when a physical or behavioral health emergency is identified by screening, triage, or other emergency medical assessments.
2. The Division shall require triage/screening services to be reasonable, cost effective and meet the criteria for severity of illness and intensity of service.
3. The Division shall not require an emergency medical service provider to obtain a Prior Authorization for emergency services.
4. The Division shall require emergency medical service providers to comply with the notification and post-stabilization requirements as outlined in A.A.C. R9-22-210.

5. The Division shall not deny payment for the treatment of emergency services when:
 - a. Division or Administrative Services Subcontractor (AdSS) staff instructs the Member to seek emergency services.
 - b. The Member's medical condition manifests itself by acute symptoms of sufficient severity, including severe pain, such that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect that the absence of immediate medical attention to result in placing the health of the individual or an unborn child in serious jeopardy; serious impairment to bodily functions; or serious dysfunction of any bodily organ or part.
 - c. The emergency room provider, hospital, or fiscal agent notified the AdSS within 10 Calendar Days of presentation for emergency services.
6. The Division shall not deny payment for emergency services or limit emergency services based on a list of diagnoses or symptoms.

7. The Division shall require the emergency room provider or hospital to notify the AdSS within 10 days from the day that the Division Member presented for provision of emergency services.
8. The Division shall provide education to THP Members regarding the appropriate use of emergency room services, encouraging Members to obtain services from non-emergency facilities to address Member's non-emergency care after regular office hours or on weekends.
9. The Division shall require the AdSSs to develop and implement policy and procedure focused on providing education to Members about appropriate use of:
 - a. Emergency room services;
 - b. Obtaining non-emergency care services available after regular office hours or on weekends;
 - c. Obtaining services from non-emergency care facilities;
or
 - d. Nurse triage or crisis lines.

10. The Division shall require AdSSs to develop and implement policy and procedure to analyze ED utilization and an ED diversion process.
11. The Division shall cover emergency services when the Member is out of the Member's Provider Network area.
12. The Division shall not cover Emergency Services provided to a Member outside the United States.

B. DIVISION OVERSIGHT AND MONITORING

The Division shall oversee the AdSS utilizing the following methods to ensure compliance with policy:

- a. Annual Operational Review of each AdSS;
- b. Review and analyze deliverable reports submitted by the AdSS;
and
- c. Conduct oversight meetings with the AdSS for the purpose of:
 - i. Reviewing compliance;
 - ii. Addressing concerns with access to care or other quality of care concerns;
 - iii. Discussing systemic issues; and
 - iv. Providing direction or support to the AdSS as necessary.

SUPPLEMENTAL INFORMATION

1. Refer to A.A.C. R9-22-210 that describes general provisions for responsible entities, payment and denial of payment, notification requirements and post-stabilization requirements.
2. THP members receive education regarding emergency services via the AHCCCS Handbook for Members of the Tribal Health Plan and or the Tribal Regional Behavioral Health Authorities located on the AHCCCS website – American Indians – American Indian Health Program.
3. Refer to AMPM Chapter Policy 530 regarding member transfers between facilities after an emergency hospitalization.
4. Refer to AMPM Chapter Policy 820 for additional information regarding emergency medical services for FFS members who are not in the FES Program.

Signature of Chief Medical Officer: 
[Anthony Dekker \(Sep 9, 2024 07:04 PDT\)](#)
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