



Division of Developmental Disabilities

POLICY REVISION HISTORY

Division Medical Policy Manual

November 13, 2024

November 6, 2024

October 9, 2024

October 2, 2024

September 11, 2024

August 28, 2024

August 7, 2024

July 10, 2024

July 3, 2024

June 26, 2024

June 19, 2024

June 12, 2024

June 5, 2024

May 29, 2024

May 22, 2024

May 8, 2024

May 1, 2024

April 17, 2024

April 10, 2024

March 27, 2024

March 20, 2024

February 28, 2024

February 7, 2024

January 24, 2024

January 17, 2024

January 10, 2024

January 3, 2024

December 13, 2023

November 22, 2023

November 15, 2023

November 8, 2023



Division of Developmental Disabilities

POLICY REVISION HISTORY

Division Medical Policy Manual

October 25, 2023	May 18, 2022	January 15, 2020
October 11, 2023	May 11, 2022	December 18, 2019
September 6, 2023	May 4, 2022	October 1, 2019
August 30, 2023	April 20, 2022	September 25, 2019
August 23, 2023	April 6, 2022	September 11, 2019
August 16, 2023	April 1, 2022	July 3, 2019
August 9, 2023	March 9, 2022	May 8, 2019
August 2, 2023	February 23, 2022	April 24, 2019
July 26, 2023	February 16, 2022	November 29, 2018
July 19, 2023	February 2, 2022	October 1, 2018
June 28, 2023	December 29, 2021	August 22, 2018
June 7, 2023	October 6, 2021	August 1, 2018
May 31, 2023	October 1, 2021	June 13, 2018
May 10, 2023	September 15, 2021	May 23, 2018
April 26, 2023	September 8, 2021	November 22, 2017
April 21, 2023	August 14, 2021	November 17, 2017
March 1, 2023	July 14, 2021	September 15, 2017
February 22, 2023	July 6, 2021	August 15, 2017
January 25, 2023	June 16, 2021	May 5, 2017
January 18, 2023	June 9, 2021	March 3, 2017
December 21, 2022	May 24, 2021	October 14, 2016
December 7, 2022	March 24, 2021	June 15, 2016
November 9, 2022	March 17, 2021	June 10, 2016
October 26, 2022	March 3, 2021	May 27, 2016
September 14, 2022	October 28, 2020	May 13, 2016
July 20, 2022	September 30, 2020	April 1, 2016
July 13, 2022	September 2, 2020	March 25, 2016
June 29, 2022	July 29, 2020	February 26, 2016
June 22, 2022	April 22, 2020	January 29, 2016
June 8, 2022	March 4, 2020	October 8, 2015

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: November 13, 2024

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

Revised Policies:

1010 Medical Management Administrative Requirements

Updates/or Summary:

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

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

1240-E Habilitation Services and Day Services

Updates/or Summary:

Division Medical Policy Manual - 1200 Services and Settings

This policy has been developed to outline the requirements for and describes covered Habilitation Hourly Support, Habilitation Music, Habilitation Supported Living, and Day Services, for Division Members who are eligible for Arizona Long Term Care Services (ALTCS) to include:

- Changed the title from Habilitation Services and Day Treatment Services to Habilitation Services and Day Services.
- Added definition for Direct Support Professional, Independent Providers, Home, and Teaching Strategy
- Deleted definition for Extraordinary Care and Own Home
- Added additional policy statements with various requirements for Habilitation Services.
- Added additional policy statements with various requirements for Hourly Habilitation.
- Deleted various policy statements for Hourly Habilitation.
- Added a new section for Habilitation Supported Living with various policy requirements.
- Added additional policy statements with various requirements for Day Services.
- Deleted various policy statements for Day Services.
- Added a new section for Habilitation, Music with various policy requirements.

Division of Developmental Disabilities
Division Medical Policy
Manual Revision History

Date: November 6, 2024

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

Revised Policies:

510 Primary Care Providers

Updates/or Summary:

Division Medical Policy Manual – Chapter 500 Care Coordination Requirements

This policy has been revised to outline the requirements applicable to the Division of Developmental Disabilities (Division) regarding Primary Care Providers participating in Arizona Health Care Cost Containment System (AHCCCS) programs to include:

- Changed the word ensure to require throughout the policy

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: October 9, 2024

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

New Policies:

582 Support and Rehabilitation Services for Children, Youth, and Young Adults

Updates/or Summary:

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

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

Updates/or Summary:

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

586 Children's Out-of-Home Services

Updates/or Summary:

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

1620-P Interdisciplinary Collaboration

Updates/or Summary:

This is a new policy that outlines the requirements for interactions, collaboration, and communication among the Division's Support Coordination staff, other Non-Clinical staff, the Member's Usual Care Providers, and Division Clinicians to ensure integrated care addressing physical health needs, behavioral health needs, and Long Term Services and Support (LTSS).

Description of changes:

- The Division shall implement a comprehensive and coordinated delivery system for integrating physical health services, behavioral health services, and LTSS through comprehensive care coordination of clinical and non-clinical services among the Division, the Administrative Services Subcontractors (AdSS), and the AdSS' respective providers.
- Outlines the types of interactions that require clinician involvement.
- Stipulates the reasons a Support Coordinator would refer communication to a clinician.
- The Support Coordinator will determine which is the most appropriate process to involve a Clinician. The processes include IRT, COIDT, Completing Referrals for support within the Division, and requesting a consultation with a clinician within the Division.

Retired Policies:

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

Updates/or Summary:

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

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: October 2, 2024

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

Revised Policies:

1302 Independent Provider Program

Updates/or Summary:

This policy was revised to update the number of hours an Independent Provider can provide services from 40 hours per week to not more than 16 hours in a 24-hour period.

Minor revisions were done to update the language and formatting to align with current Policy unit standards.

Definitions for "Member" and "Responsible Person" were added
The Reference section was updated

Headers were added for "Program Requirements", "Member/Responsible Person Responsibilities" and "Fiscal Intermediary Responsibilities"

Division of Developmental Disabilities

AdSS Medical Policy Manual

Revision History

Date: September 11, 2024

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

New Policies:

310-F Emergency Medical Services

Updates/or Summary:

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

Revised Policies:

310-V Prescription Medication Pharmacy Services

Updates/or Summary:

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

431 Dental/Oral Health Services for EPSDT Eligible Members

Updates/or Summary:

Division Medical Policy Manual - 400 Maternal and Child Health

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

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

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: August 28, 2024

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

Revised Policies:

310-X Habilitative or Developmental Occupational Therapy, Physical Therapy, and Speech Pathology Services

Updates/or Summary:

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

- Updates the policy title from "Rehabilitative Therapy" to "Habilitative or Developmental Occupational Therapy, Physical Therapy, and Speech Pathology Services".
- Updates the purpose statement to clarify the Division's coverage of habilitative or developmental therapy services.
- Updates the definitions section of the policy.
- Outlines requirements for the Division for covering habilitative or developmental therapy services.

570 Behavioral Health Provider Case Management

Updates/or Summary:

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

- Definition added for Tribal Health Program.
- Definitions for types of provider case management intensity were removed from the Definitions Section and incorporated as policy language within the policy.
- The term "crisis and safety plan" changed to "safety plan" throughout the policy.
- Contact with a member within "24 hours" of discharge from a crisis setting changed to within "72 hours" of discharge from a crisis setting.
- Reference to "Division, TRBHAs and fee-for-service providers" changed to "fee-for-service providers" throughout the policy.
- "Housing Services" and "Social Determinants of Health" were added to help clarify case management activities.
- Language added in Section D., "The Division Behavioral Health Administration shall monitor the AHCCCS QM Portal for notifications and monthly progress reports for out-of-state placement for behavioral health treatment."
- Language added regarding completion of the special assistance assessment and entering the assessment into the medical record.
- Language added regarding coordinating additional supports and services to accommodate member needs during and after a crisis event.
- Clarifying language added with respect to expectations of members receiving contact

information regarding On-Call 24/7 availability of services and how to access the crisis system and other natural supports to respond to member crisis.

- Clarifying language added regarding the contractor's duty to ensure providers meet caseload ratios.
- New section added regarding Division Oversight and Monitoring of Administrative Services Subcontractors.

1240-G1 Exhibit Skilled Nursing Matrix

Updates/or Summary:

Division Medical Policy Manual - 1200 Services and Settings

This exhibit has been revised to update the Skilled Nursing Matrix to include:

- Change the 3rd column from Skilled Nursing Task to Task
- Added an additional column for Skilled Nursing Services
- Added criteria for G Tube Feeding, G Tube Medication Administration, Insulin Pump, Continuous Glucose Monitoring (CGM), Intermittent blood glucose monitoring, Pain management, and Surgical Wounds.
- Updated to Medical Definition and Task for several conditions

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: August 7, 2024

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

Revised Policies:

450 Out-of-State Placement for Behavioral Health Treatment

Updates/or Summary:

This policy has been revised with the following:

- Minimal revisions made to this policy in preparation for the Operational Review.
- Definition of Tribal Health Program added and minor updates to other definitions.
- Language added in Section D, "The Division Behavioral Health Administration shall monitor the AHCCCS QM Portal for notifications and monthly progress reports for out-of-state placement for behavioral health treatment."
- New Section was added regarding Division Oversight and Monitoring of Administrative Services Subcontractors.

540 Electronic Visit Verification

Updates/or Summary:

This revised policy outlines the Division's requirements regarding the mandated use of an Electronic Visit Verification (EVV) system for personal care and home health services pursuant to 42 U.S.C. §1396b(l).

Description of changes:

1. This policy was previously titled "Other Care Coordination Issues" but this policy has been revised to cover the Electronic Visit Verification (EVV) policy to align with the AMPM 540
2. Ensures that all Providers who are subject to EVV utilize the AHCCCS procured system or an AHCCCS approved Alternate EVV System to electronically track the defined data specifications available on the AHCCCS website.
3. Outlines the requirements for the use of paper timesheets.
4. Requires the providers to have at least two EVV modalities available to the Responsible Person and allows the Responsible Person to choose their preferred EVV modality.
5. Outlines the requirements for the Contingency/Backup plan.
6. The Division will monitor Provider responsibilities specified in this policy as part of annual monitoring to ensure compliance with the roles and responsibilities of the Provider required to utilize EVV.
7. A Supplemental Information section has been added.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: July 10, 2024

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

New Policies:

583 Family Involvement in the Children's Behavioral Health System

Updates/or Summary:

This policy was developed in response to AHCCCS converting Behavioral Health Practice Tool 240 into a new AHCCCS Medical Policy 583. The policy sets forth evidenced-based best practices regarding family involvement in the children's behavioral health system.

584 Youth Involvement in the Children's Behavioral Health System

Updates/or Summary:

This policy was developed in response to AHCCCS converting Behavioral Health Practice Tool 250 into a new AHCCCS Medical Policy 584. The policy sets forth evidenced-based best practices regarding youth involvement in the children's behavioral health system.

Revised Policies:

410 Maternity Care Services

Updates/or Summary:

This policy has been revised to establish requirements for the Division of Developmental Disabilities (Division) regarding Maternity Care Services to include:

- Added a definition for Controlled Substances Prescription Monitoring Program, Early and Periodic Screening, Diagnostic, and Treatment, Free Standing Birthing Centers, Prior Authorization, and Substance Use Disorder.
- Deleted references to ACOG
- Changed Postpartum Depression to Perinatal mood and anxiety disorders
- Changed to gender neutral language
- Added Vaccines for Children program under support resources and programs
- Added statement for Maternity Care Providers education Members on warning signs of complications of pregnancy and Postpartum, including when to contact the Provider for Added the statement where Maternity Care Providers are aware of and encouraged to use the Arizona Perinatal Psychiatry Access Line (A-PAL) when questions surrounding mental health or substance use treatment, including medication management, arise under demonstration of an established process
- Added a statement and examples where the process to address the following SUD treatment, referral, and follow-up specific to maternity Members, per ACOG guidelines

- Added a statement to reimburse provider claims for Global Obstetrical (OB) codes if billed in accordance with the requirements outlined in the AHCCCS Fee-for-Service Provider Billing Manual.
- Added a statement for a plan of action being submitted to the AHCCCS Chief Medical Officer or designee for Tribal Health Program Members, or the contractor Medical Director or designee for Members enrolled with an AHCCCS contractor.
- Added criteria LM's are responsible for upon delivery of a newborn

960 Quality of Care Concerns

Updates/or Summary:

This policy has been revised to better clarify roles of Division staff when addressing Quality of Care Concerns. Language has been added to better clarify Division staff roles, responsibilities, and process for addressing Quality of Care Concerns. Grammatical and formatting updates were made to reflect current standards.

966 Immediate Jeopardy

Updates/or Summary:

Immediate Jeopardy has been updated after Public Comment to correct information on heating and cooling units and setting types on page 11.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: July 3, 2024

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

Revised Policies:

431 Dental/Oral Health Services for EPSDT Eligible Members

Updates/or Summary:

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

- Changing the definition for Informed Consent and deleting the definition for Provider.
- Changed Anxiolysis sedation to Anxiolytic sedation.
- Added Dental Appliances as a covered service for EPSDT dental/oral health.
- Added a reference to A.R.S. §§ 32-1291.01 for Affiliate Practice Dental Hygienist requirements.
- Formatting to align with Policy standards.

961 Incident, Accident, and Death Reporting

Updates/or Summary:

This policy has been revised to:

- Establish the requirements for the reporting, reviewing, and monitoring of Incident, Accident, Death (IAD) of Members enrolled with the Division of Developmental Disabilities (Division).
- Add new definitions.
- Add new provisions, remove unnecessary provisions, and update existing language throughout the policy to align with AMPM 961.
- Update language, formatting, and style throughout the policy to align with the Division's Policy Format Manual.

Retired Policies:

320-K Tobacco Cessation Products

Updates/or Summary:

This policy is being retired as information is included in other policies and no longer relevant.

1000 Chapter Overview

Updates/or Summary:

This policy is being retired as information is included in other policies and no longer relevant.

1200 Overview

Updates/or Summary:

This policy is being retired as information is included in other policies and no longer relevant.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: June 26, 2024

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

Revised Policies:

920 Quality Management and Performance Improvement Program Administrative Requirements

Updates/or Summary:

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

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

Contract Chart of Deliverables.

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

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: June 19, 2024

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

Revised Policies:

970 Performance Measures

Updates/or Summary:

This policy has been revised to better align with AHCCCS updates. Changes include added definitions and NCQA language in addition to updated language to increase readability of material.

1620-N Services Closure and Case Closure

Updates/or Summary:

Reason for changes:

This is a revised policy that identifies the reasons covered service(s) may be closed and outlines the criteria that are required for the Division to close a Member's case file.

Description of changes:

1. This policy has been written and formatted to meet current policy standards.
2. Information within the policy has been rearranged or reworded to improve clarity and readability.
3. The Definitions section has been updated to include additional and revised terms.
4. Information pertaining to the Electronic Member Change Report (eMCR) has been removed from this policy.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: June 12, 2024

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

New Policies:

963 Peer and Recovery Support Service Provision Requirements

Updates/or Summary:

This new Division policy has been created to provide guidance to provide Division oversight of their Administrative Services Subcontractors provision of Peer Support Services within their programs.

This policy outlines Division oversight of the AdSSs provision of Peer Support Services within AdSS programs, including qualifications, supervision, continuing education, and training/Credentialing of Peer and Recovery Support Specialists (PRSS).

964 Credentialed Family Support Partner Requirements

Updates/or Summary:

This new Division policy has been created to provide guidance for the Division when providing oversight of Administrative Services Subcontractors in their administration of training and credentialing standards for individuals seeking employment as a Credentialed Family Support Provider. This policy also outlines program approval requirements.

969 Collaborating with Peers and Families

Updates/or Summary:

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

This policy:

- Sets forth guidance for the Division's OIFA in providing oversight to the AdSSs when collaborating with Member Peers and Families, outlining expectations of interactions with Peer Run Organizations and Family Run Organizations.
- Guidance includes Division OIFA participation in Committees.

Revised Policies:

940 Medical Records and Communication of Clinical Information

Updates/or Summary:

- This policy has been revised to establish the Division of Developmental Disabilities (DDD) requirements for protection of Member information, documentation requirements for Member physical and behavioral health records, and specifies record review requirements including the use of Electronic Health Records (EHR) and external health information systems to include:
- Added a statement about Medical Records being available to individuals authorized according to policies and procedures as permitted by law.
- Added a statement for the Division to require Providers who distribute information electronically indicate the information is available in paper format upon request.
- Added a statement when telemedicine is conducted, records clearly identify that the visit is a telemedicine visit.
- Added a statement where the Division shall require Providers to identify the treating or consulting Provider as a Member may have more than one medical record kept by various physical or behavioral health care providers that have rendered services.
- Added a statement where Behavioral health history and information received from an AHCCCS Contractor, TRBHA, or other Provider involved with the Member's behavioral health care, even if the Provider has not yet seen the assigned Member.
- Added a statement for evidence that PCPs are utilizing and retaining developmental screening tools and conducting developmental and Autism Spectrum Disorder (ASD) screenings at required ages, as specified in AMPM Policy 430.
- Changed "Tracking Form" to "Clinical Sample Templates"
- Added a statement for documentation to reflect maternity care providers screen all pregnant Members once a trimester through use of the CSPMP database.
- Added a statement for the Division requiring general clinical information that includes supplemental CFT or ART documentation and updates; and additional assessment or screening documentation that provides further evidence to ensure Member's needs are being identified through either standardized assessment or screening tools.
- Changed "Hard Copy" to "Paper Format"
- Added a statement where additional service plans from other entities involved with the Member that include Service or treatment plans from other providers, Person Centered Service Plans (PCSP)s, Individual Education Plan (IEP) from Arizona Department of Education, and Service plans from Arizona Department of Corrections (ADOC), or Arizona Department of Juvenile Corrections (ADJC).
- Added a statement where deficiencies identified are shared with all health plans contracted with the Provider.
- Added a statement where notification is given within 24 hours in order to conduct an independent onsite Provider audit if quality of care issues are identified during the Medical Record review process.
- Added a statement where the Division shall have policies and procedures in place for the use of electronic physical and behavioral health Medical Records and for Health Information Exchange (HIE) via the State's Health Information Organization (HIO) and digital signatures.
- Added a statement where Medical Records or copies of Medical Records are forwarded to the new PCP treating behavioral health Provider(s) or entity(ies) involved in the Member's care, within 10 business days from receipt of the request for transfer of the Medical Records.
- Added a statement where an audit of Providers that serve as the PCP to include Pediatricians, Internists, and Obstetricians/Gynecologists (OB/GYNs)
- Added a statement for evidence of coordination and collaboration with other providers or community stakeholder agencies.
- Added a statement for Evidence of assisting the member with identification of Social Determinants of Health (SDOH) or Health Related Social Needs (HRSN)
- Added a statement where deficiencies identified are shared with all health plans contracted with the Provider and notification is given within 24 hours in order to conduct an independent onsite Provider audit if quality of care issues are identified during the Medical Record review process.

1023 Disease / Chronic Care Management

Updates/or Summary:

This policy was revised to align with recent changes to AMPM 1023 and as part of the Division's work to be accredited by the National Committee for Quality Assurance (NCQA). Language and formatting was revised throughout the policy to align with current Policy Unit Standards. The section for "Oversight and Monitoring" was expanded. Definitions were added for "Care Management", Disease/Chronic Care Condition, "Fatal Five", "Long COVID" and "Service Provider" were added. The definition for "Person Centered Service Plan" was removed.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: June 5, 2024

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

Revised Policies:

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

Updates/or Summary:

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

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

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

Updates/or Summary:

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

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

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: May 29, 2024

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

Revised Policies:

910 Quality Management and Performance Improvement Program Scope

Updates/or Summary:

This policy has been revised to:

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

950 Credentialing and Recredentialing Processes

Updates/or Summary:

This policy has been revised to:

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

Division of Developmental Disabilities
Division Medical Policy
Manual Revision History

Date: May 22, 2024

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

Revised Policies:

310-L Hysterectomy

Updates/or Summary:

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

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: May 8, 2024

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

New Policies:

580 Child and Family Team

Updates/or Summary:

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

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

The new 580 policy, Child and Family Team, has been developed in compliance with AHCCCS contractual obligations and development of the new AHCCCS Medical Policy 580, and also used the same numbering convention as AHCCCS.

The Child and Family Team policy has been developed to lay the foundation of Child and Family Team Practice that provides a universal Child and Family Team system of care; indicators that contribute to the complexity of needs for the child and family; how the Child and Adolescent Level of Care Utilization System is utilized; and how the essential Child and Family Team practice activities are implemented on individualized needs.

The Policy also incorporates pertinent information from the former AHCCCS Behavioral Health Practice Tool 220 and is an optional resource for the Tribal Health Program, but not a requirement for FFS providers.

Revised Policies:

310-J Hospice Services

Updates/or Summary:

This is a revised policy that outlines the Division's commitment to the availability of Hospice Services.

Description of changes:

1. This policy has been revised with current Division Policy Unit formatting standards.
2. The definition section has been updated to reflect current definitions.
3. This policy now has a Supplemental Information section that includes information pertaining to Hospice services.

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

Updates/or Summary:

Division Medical Policy 320-O and AdSS Medical Policy 320-O, Behavioral Health Assessments, Service, and Treatment Planning, respectively, have been updated to comply with recent AHCCCS updates to AMPM 320-O as follows:

- Several sections of the policy removed and reorganized accordingly.
- Title change from "Behavioral Health Assessments and Treatment/Service Planning" to "Behavioral Health Assessments, Service, and Treatment Planning" to align with AMPM 320-O.
- The term "Crisis and Safety Plan" updated to "Safety Plan."
- Definition of "Health Home" removed, as well as references within the policy.
- Added clarifying language for behavioral health assessments, service, and treatment planning, coordination requirements, and the addition of Serious Emotional Disturbance population applicability.
- Added language regarding positive substance use results may be shared only if the member has authorized sharing of protected health information (45 CFR 160.103).

520 Member Transitions

Updates/or Summary:

This policy has been revised to establish requirements applicable to the Division of Developmental Disabilities (Division) to identify and facilitate Member transitions between the Administrative Services Subcontractors (AdSS), the Division, and other Arizona Health Care Cost Containment System (AHCCCS) contractors and the Division's oversight of the AdSS to include:

- Added definitions for Member Care Transition
- Deleted definition for Medical Equipment, Appliances and Member Contractor Care Transition, Receiving Contractor, and Relinquishing Contractor
- Added a statement where the Division shall receive transitioning Fee for Service (FFS) Member information via automated electronic transfer file access through the AHCCCS Secured File Transfer Protocol (SFTP) Server
- Added a statement where the Division shall develop policies or protocols to address the transition of Members with certain medical conditions
- Added a statement where the Division shall accept the electronic ETI Form submitted by the relinquishing Contractor
- Added a statement where the Division shall require that the AdSS provides a minimum 90 calendar day transition period allowing the Members with Special Health Care Needs to continue seeking care from their previously established PCP that does not participate in the AdSS network while the Responsible Person, Support Coordinator, Care Manager or Provider Case Manager identifies an alternative PCP within the AdSS provider network
- Added a statement where the Division shall require that the relinquishing AdSS coordinate transition with the receiving AdSS, Contractor, or Tribal ALTCS if a Member is approved for ALTCS enrollment
- Added a statement where the Division shall require applicable protocols are followed for any special circumstances of the Member and that continuity and quality of care is maintained during and after the transition as specified in ACOM Policy 402 and AMPM Policy 1620
- Added criteria for the Division ensuring transitions for Members involving co-occurring behavioral and physical health conditions
- Added a statement where the Division shall require ALTCS eligible Members under age 21 receiving Licensed Health Aide services to be engaged in transition planning and communication, if offered to families prior to the Member's 21st birthday
- Added a statement where the Division shall require Members under age 21 receiving Licensed Health Aide services are engaged in transition planning and communication, if

- offered to families prior to the Member's 21st birthday
- Added a statement where the Division shall ensure LHA services are not provided to Members 21 years and older as specified in AMPM Policy 1240-G and A.A.C. R4-19-901
- Added a statement where the Division shall be responsible for transplant related components up to and including completion of the service components that the Member is receiving at the time of the change. The receiving health plan is responsible for the remainder of the components of the transplant
- Added a statement where the Division shall allow Members receiving behavioral health medications from the PCP simultaneously receive counseling and other medically necessary services
- Added a statement where the Division shall require the Member to have a 90-day trial period to determine if the ACD will be effective for the Member, or if it should be replaced with another device
- Added criteria for the a 90-day trial period if a Member transitions from an AdSS or Contractor
- Added a statement where the Division Transition Coordinator shall notify the Division Behavioral Health Administration and Support Coordinator of all Member transitions between health plans in which Members are receiving behavioral health services, including therapeutic foster care
- Removed the section for Out of Service Area Placement Referrals for Members with an SMI Designation

980 Performance Improvement Projects

Updates/or Summary:

This policy has been updated to reflect updated guidance in use of Performance Improvement Projects. Changes include: Clarified guidance for self-selected and mandated PIPs, addition of health equity considerations for consideration as a unique factor for implementing interventions to improve performance.

Retired Policies:

580 Behavioral Health Referral Process

Updates/or Summary:

This policy is being retired as it has been replaced by the new Division Medical 580 Child and Family Team (published 5/8/2024) and is no longer needed. The same information is contained within other Division Medical Policies.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: May 1, 2024

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

Revised Policies:

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

Updates/or Summary:

This policy has been revised to establish the requirements for and describes covered Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services for the Division of Developmental Disabilities to include:

- Added definitions for Care Management, Periodicity Schedule, Provider, Responsible Person, Sick Visit, Third Party, Well Child Visit and Work Plan
- Added a section for General Requirements
- Deleted the section for EPSDT Services
- Added a section for Covered Services During an EPSDT Visit
- Added a statement about criteria of when a sick visit can be performed at the same time as an EPSDT visit
- Added a section for the REquirements for the ESPDT Program Plan and Checklist
- Added a statement about the AdSS providing awareness of all EPSDT requirements through annual provider newsletters and provider manual
- Added a list of covered services that providers shall adhere to
- Added additional pertinent information for Nutritional Therapy
- Added information about Cochlear and Osseointegrated Implantation services
- Added further information about the provision of Incontinence Briefs including pull ups and incontinence pads

610 AHCCCS Provider Qualifications

Updates/or Summary:

This policy has been revised to specify the Arizona Health Care Cost Containment System (AHCCCS) provider enrollment, revalidation, and re-enrollment requirements.

- Updated references.
- Added Purpose statement.
- Added new definitions.
- Updated provider's responsibilities, AHCCCS Provider Registration Materials section, and AHCCCS Provider Types section; and added Conflict of Interest section.
- Added Supplemental Information.
- Updated language, formatting, and style throughout the policy to align with the Division's Policy Format Manual.

1620-B Needs Assessment/Care Planning Standard

Updates/or Summary:

This is a revised policy that establishes requirements regarding needs assessment and care planning.

Description of changes:

- This policy has been revised to meet current Division formatting standards.
- The definition section has been updated to reflect current definitions.
- Statements regarding the need to utilize the Respite Assessment Tool (Form DDD-2042A) and the Member Level of Care Tool (MLOC) (Form DDD-2096A) have been added.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: April 17, 2024

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

Revised Policies:

510 Primary Care Providers

Updates/or Summary:

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

- Changed the definition for Business Days
- Changed the definition for Primary Care Provider
- Added a statement for monitoring and adjusting behavioral health medication as specified in AMPM 310-V for prior authorizations for antipsychotic class of medications
- Added a statement for the Division to require coordination and collaboration with behavioral health providers
- Changed a statement for the Division to require PCPs in their care coordination role serve as a referral agent for specialty and referral treatment, and services for physical or behavioral health services as needed for Members
- Removed the statement about quality care that is efficient and cost effective
- Added home visits, Member education, preventative health services and screening and referral for health related social needs under coordination of medical care for Member
- Removed the section for Maintenance of the Member medical records
- Added a statement requiring the AdSS maintain a current file of Member PCP assignments to facilitate continuity of care, control utilization, and obtain encounter data
- Added a statement requiring the AdSS to make PCP assignment rosters and clinical information regarding Member's health and medications, including behavioral health providers, available to the assigned PCP
- Formatting to align with Policy standards

530 Member Transfers Between Facilities

Updates/or Summary:

This policy has been revised to establish the requirements applicable to the Division of Developmental Disabilities (Division) when a Member transitions between facilities to include:

- Adding Level of life support for transportation orders between inpatient hospitals facilities following Emergency hospitalization
- Adding criteria when a Member transfers to a higher level of care facility
- Removing the section for Neonate transfers between acute care centers
- Adding a section for the AdSS oversight and monitoring
- Formatting to align with Policy standards

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: April 10, 2024

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

New Policies:

1022 Justice Reach-In

Updates/or Summary:

New Division Medical Policy 1022 Justice Reach-In was previously part of a larger policy and has been broken out as a "stand-alone" policy. This policy describes the Division's Justice Reach-In program and the role of the Justice System Liaisons who support Division Members who are involved in the Justice System by:

- Emphasizing the importance of the Division's Justice System Liaison serving as the single point of contact when collaborating with justice system partners to identify, plan, and implement care coordination efforts for Members.
- Describing the Support Coordinator role from the point when they become aware of a Member on their caseload having Justice System involvement.
- Emphasizing that Division staff shall not appear on the Member's behalf, in the capacity of Division staff, in any court, unless a subpoena has been submitted through the Office of the Attorney General.
- Describing outreach to community partners, including provision of specialized education to local law enforcement and other community partners to facilitate understanding of developmental disabilities in the populations served by the Division.
- Describing interaction between the Division and Member health plans in the event of a Member's incarceration.

Revised Policies:

1610 Guiding Principles and Components of Support Coordination

Updates/or Summary:

This is a revised policy that establishes an overview of the guiding principles and components of Support Coordination.

- This policy has been revised with current Division Policy Unit formatting standards.
- Definition section has been updated to reflect current definitions.
- This policy now has a Supplemental Information section that includes a reference for where information regarding the Arizona Early Intervention Program (AZEIP) can be found.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: March 27, 2024

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

Revised Policies:

1024 Drug Utilization Review

Updates/or Summary:

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

Division of Developmental Disabilities
Division Medical Policy
Manual Revision History

Date: March 20, 2024

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

New Policies:

1621 Enhanced Staffing Ratios

Updates/or Summary:

This is a new policy that outlines the Division's requirements when assessing for and approving Enhanced Staffing Ratios (ESR) for Members who may need increased support in a specific setting.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: February 28, 2024

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

Retired Policies:

1030 Reporting Requirements

Updates/or Summary:

This policy has been retired as it is no longer a policy with AHCCCS.

1250-C Medical and Acute Care Services

Updates/or Summary:

This policy has been retired as there is no AMPM policy. Information from 1250-C is included in Medical 1020 and can also be found other policies.

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

Updates/or Summary:

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

1250-G Nutritional Assessments and Nutritional Therapy

Updates/or Summary:

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

1250-H Transportation

Updates/or Summary:

This policy has been retired as it is now located in 1250-Y Scheduled Transportation.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: February 7, 2024

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

Revised Policies:

310-L Hysterectomy

Updates/or Summary:

This policy was revised to align with recent updates to the AMPM 310-L. New sections were added for "Limitations", "Second Level Review", "Division Oversight" and "Supplemental Information". A new section for Definitions was added. Language and formatting was revised to align with current Policy Unit standards.

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

Updates/or Summary:

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

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

Updates/or Summary:

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

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

431 Dental/Oral Health Services for EPSDT Eligible Members

Updates/or Summary:

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

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

1250-Y Scheduled Transportation

Updates/or Summary:

Medical Manual 1250-Y Scheduled Transportation was revised with the following changes:

- Updated the policy chapter number and title from 1250-H to 1250-Y, Scheduled Transportation.
- Adds a purpose statement and definitions section to the policy.
- Aligns scheduled transportation requirements to the RFQVA service specifications.
- Updates the document to align with DDD's policy formatting standards.

Division of Developmental Disabilities
Division Medical Policy
Manual Revision History

Date: January 24, 2024

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

Revised Policies:

310-V Prescription Medication/Pharmacy Services

Updates/or Summary:

This policy was revised to add "Social Security Act Section 1927 (g) Drug Use Review" and " 42 USC 1396A(OO)" to the Reference section.

Division of Developmental Disabilities
Division Medical Policy
Manual Revision History

Date: January 17, 2024

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

Retired Policies:

310-F Emergency Medical Services

Updates/or Summary:

Division Medical 310-F has been retired as content can be found in 310-BB.

310-W Radiology and Medical Imaging

Updates/or Summary:

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

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: January 10, 2024

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

Revised Policies:

420 Family Planning Services and Supplies

Updates/or Summary:

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

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

310-V Prescription Medication Pharmacy Services

Updates/or Summary:

- The policy was revised to align with revisions to AMPM 310-V.
- Formatting and language was updated throughout the policy to align with current Policy Unit standards.
- The Definition section was added to align with the policy.
- Additional items added to the list of "Conditions and Care Exclusion from the 5-day Supply Limitation" due to SB1162.

320-V Behavioral Health Residential Facilities

Updates/or Summary:

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

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

320-W Therapeutic Foster Care for Children

Updates/or Summary:

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

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

1240-G Skilled Nursing and Licensed Health Aide Services

Updates/or Summary:

- AMPM 520 was added to the Reference section due to the AHCCCS updated requirements for transition planning for LHA prior to age 21.
- Minor grammatical and formatting revisions were made throughout the policy to align with current Policy Unit standards.
- The Definition section was updated to reflect the current Policy Unit definitions for "Member" and "Planning Team."
- The Definition section was revised to add "Intermittent Nursing Services", "Responsible Person", "Skilled Nursing Care/Services" and "Visit".
- Grammatical revisions were made to replace commas with semicolons in lists, where appropriate.
- A new line was added for the "Reviewed Date".

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: January 3, 2024

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

Revised Policies:

310-FF Monitoring Controlled and Non-Controlled Medication Utilization

Updates/or Summary:

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

1640 Targeted Support Coordination Standards

Updates/or Summary:

This policy has been revised as part of the Division's work to be accredited by the National Committee for Quality Assurance (NCQA).

Revisions include:

- Added section that references the need for the Acknowledgement of Publications to be signed indicating receipt and understanding of member rights and responsibilities.
- Added additional and updated existing definitions.
- Formatted to align with current Policy standards.

Retired Policies:

320-A Affiliated Practice Dental Hygienist

Updates/or Summary:

This policy has been retired as Affiliated Practice Dental Hygienist is now part of Division Medical 431.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: December 13, 2023

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

New Policies:

310-II Genetic Testing

Updates/or Summary:

This policy establishes the coverage requirements and limitations of Genetic Testing for Division of Developmental Disabilities (Division) Members who are eligible for ALTCS to include:

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

310-KK Biomarker Testing

Updates/or Summary:

This policy has been developed to establish the coverage requirements of Biomarker Testing for the Division of Developmental Disabilities (Division) to include:

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

Revised Policies:

1620-A Initial Contact / Visit Standards

Updates/or Summary:

This policy has been revised as part of the Division's work to be accredited by the National Committee for Quality Assurance (NCQA). Revisions include:

- Clarified the reference to the Acknowledgement of Publications being signed indicating receipt and understanding of member rights and responsibilities.
- Added additional and updated existing definitions.
- Formatted to align with current Policy standards.

1650 Division Only (DD-Only) Eligibility Support Coordination Standards

Updates/or Summary:

This policy has been revised as part of the Division's work to be accredited by the National Committee for Quality Assurance (NCQA). Revisions include:

- Added section that references the need for the Acknowledgement of Publications to be signed indicating receipt and understanding of member rights and responsibilities.
- Added the Definitions section.
- Formatted to align with current Policy standards.

Division of Developmental Disabilities
Division Medical Policy
Manual Revision History

Date: November 22, 2023

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

Retired Policies:

1250-B Hospice

Updates/or Summary:

This policy is being retired as it contains duplicative information.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: November 15, 2023

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

Revised Policies:

680-C Pre-Admission Screening and Resident Review

Updates/or Summary:

This policy outlines the Division of Developmental Disabilities (Division) role in the Pre-Admission Screening and Resident Review (PASRR) requirements with the Intergovernmental Agreement.

Details:

- The term "Level II Screening" was changed to "Level II Assessment"
- The definition of "Member" was added.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: November 8, 2023

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

Revised Policies:

1021 Care Management

Updates/or Summary:

The Division 1021 Care Management policy was revised again after the public comment period ended on July 28th due to public comment and internal review.

- The Purpose statement was revised to add "The policy also provides details of the Divisions responsibilities for the High Needs/High Cost program."
- "plan of care" was changed to "care plan" for consistency throughout the policy.
- Section C "Division Responsibilities" was revised to reflect the PCP is providing pertinent diagnoses to the Division.
- Section D7 was revised to read "The Division shall ensure the AdSS submit an overview of the Medical Management (MM) program plan checklist High Needs/High Cost (HNHC) program in the Medical Management (MM Program Plan, AMPM 1010 Attachment A and a MM workplan, AMPM 1010 Attachment B."
- A new Section E was added for "Division Responsibilities for the High Needs/High Cost Program" that provides details of what the Division does for the High Needs/High Cost program.

1620-L Case File Documentation

Updates/or Summary:

This is a revised policy that outlines Division's requirements to maintain complete and accurate documentation in the Member's case file that details coordination of care activities. These requirements also ensure the Division's actions provide Members with effective and efficient coordination of care.

- Revised to meet current Division formatting standards.
- New definitions have been added.
- Section A, was updated to reflect the Member Electronic and Paper records. This section also outlines the Division's responsibilities to maintain the electronic systems. The Lists in this section were condensed.
- There is now a section that applies to All Division Staff responsibilities in addition to Support Coordinator Responsibilities.
- Information regarding Prior Period Coverage has been moved to the Support Coordinator Responsibilities.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: October 25, 2023

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

Revised Policies:

410 Maternity Care Services

Updates/or Summary:

This policy establishes the requirements for the Division of Developmental Disabilities (Division) regarding Maternity Care Services to include:

- Adding a definition for Member, Provider, Responsible Person and Second Level Review
- Changed the term Pregnant Members to Pregnant Women throughout the policy
- Updated the Pregnancy Termination section to align with AHCCCS and the AdSS
- Updated the Pregnancy Termination section to align with AHCCCS and AdSS
- Added information in the policy regarding Second Level Review criteria under the Pregnancy Termination section
- Added a section for AdSS Oversight and Monitoring
- Formatting to align with Division standards

Division of Developmental Disabilities
Division Medical Policy
Manual Revision History

Date: October 11, 2023

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

Revised Policies:

910 Quality Management and Performance Improvement Program Scope

Updates/or Summary:

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

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: September 6, 2023

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

Revised Policies:

310-FF Monitoring Controlled and Non-Controlled Medication Utilization

Updates/or Summary:

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

The purpose statement was updated to align with AMPM 310-FF. The Definition section was updated to align with the policy. The "Drug Utilization Review" information in the policy was moved to policy 1024 "Drug Utilization Review". A new section in the Division 310-FF was created for Oversight and Monitoring.

420 Family Planning Services and Supplies

Updates/or Summary:

This policy has been revised to describe the requirements regarding Family Planning Services and Supplies for the Division of Developmental Disabilities (Division) Members to include:

- Include a definition for Business Days, Immediate Postpartum Long-Acting Reversible Contraceptives (IPLARC), Member and Second Level Review.
- Added a section on the Second Level Review process
- Revised the requirement that the provider counsels and recommends the Member continue another form of birth control to prevent pregnancy for up to three months following the Hysteroscopic Tubal Sterilization or Vasectomy.
- Added a requirement that the provider performs a Hysterosalpingogram or sperm count according to the current standard of care for the sterilization procedure to confirm the Member is sterile following the Hysteroscopic Tubal Sterilization or Vasectomy.
- Added a requirements that the Family Planning or Maternity Care Provider has verbally and in writing provided proper counseling and include a statement to the Member about implant removal
- Added a section on protocol for Member notification of Family Planning Services
- Added a section on Sterilization to include criteria being met, signature of the AHCCCS Consent to Sterilization form, consent being effectively communicated with the Member, Ensuring the Member receives a copy of the consent and when the Member is not able to

- consent to Sterilization
- Added a section on the Division oversight and monitoring of the AdSS
- Formatting to align with Division standards

510 Primary Care Providers

Updates/or Summary:

This policy has been revised to describe the requirements applicable to the Division of Developmental Disabilities (Division) regarding Primary Care Providers participating in AHCCCS programs to include:

- Added definitions for Business Days, EPSDT, Non-Contracting Provider, Member, Resident Physician, and Teaching Physician
- Primary Care Provider responsibilities
- Provision of initial and primary care services
- Behavioral health services provided by the Primary Care Provider
- Primary Care Provider care coordination responsibilities
- Maintenance of the Member's medical records
- Primary Care Provider assignment and appointment standards
- Referrals and appointment standards for specialty care
- Physician assistant and nurse practitioner visits in a nursing facility
- Division oversight

541 Coordination of Care with Other Government Agencies

Updates/or Summary:

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

- This policy has been updated to align with current Division policy formatting standards.
- The definitions section has been updated
- A section has been added regarding the Division's monitoring and oversight of the AdSS'

940 Medical Records and Communication of Clinical Information

Updates/or Summary:

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

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

950 Credentialing and Recredentialing Processes

Updates/or Summary:

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

970 Performance Measures

Updates/or Summary:

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

980 Performance Improvement Projects

Updates/or Summary:

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

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: August 30, 2023

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

New Policies:

320-Z Members on Conditional Release

Updates/or Summary:

This Policy establishes requirements for the care management and oversight of individuals who have been granted conditional release from the Arizona State Hospital (ASH) by the Superior Court. There was a revision to section B1 to read "The AdSS shall monitor and ensure the behavioral health outpatient providers complete the Conditional Release Monthly Monitoring Report for members on conditional release, and submit the form as directed by the Contractor Chart of Deliverables." Section B3 was revised to read "The Division shall follow all obligations, including those stated in this section, applicable to it as set forth as specified in A.R.S. § 13-3994."

Revised Policies:

1240-F Home Delivered Meals

Updates/or Summary:

Division Medical policy 1240-F was revised to add Contactless Delivery as an option.

Division of Developmental Disabilities
Division Medical Policy
Manual Revision History

Date: August 23, 2023

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

Retired Policies:

310-T Physician Services

Updates/or Summary:

This Division Medical policy is retiring. This policy is no longer relevant due to content in other policies and the AdSS or AHCCCS policies.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: August 16, 2023

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

Revised Policies:

920 Quality Management and Performance Improvement Program Administrative Requirements

Updates/or Summary:

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

960 Quality of Care Concern

Updates/or Summary:

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

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: August 9, 2023

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

New Policies:

1240-F Home Delivered Meals

Updates/or Summary:

New Division Medical Policy, 1240-F, Home Delivered Meals has been developed to set forth guidance of this new Division service. The proposed policy describes service eligibility, assessment, establishment, and provision of home delivered meals for Division ALTCS members who live in their own homes and are in jeopardy of not consuming adequate nutritious food to maintain good health.

1601 Assignment of Support Coordinators

Updates/or Summary:

The Division Medical Policy 1601, Assignment of Support Coordinators, has been moved from the Division's Eligibility Manual (formerly Chapter 500), to the Division's Medical Manual. Changes include:

- Updates made to current formatting standards.
- Description of support coordination assignment is clarified for Member's in the car of the Arizona Department of Child Safety, to reflect the assignment occurs in the District where the Member physically resides.
- Additional language added regarding caseload monitoring.

Revised Policies:

961 Incident, Accident, and Death Reporting

Updates/or Summary:

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

- New definitions added. Some existing definitions updated or removed.
- Timeframes were changed from "24 hours" to "one business day" and "48 hours" to "two

- business days."
- Clarifying language added regarding the IAD reporting process and responsibilities.
- Irrelevant language and information removed.
- Policy formatting and writing style.

962 Reporting and Monitoring of Seclusion and Restraint

Updates/or Summary:

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

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

1620-D Placement and Service Planning for ALTCS Eligible Members

Updates/or Summary:

Revised policy to align with CMS HCBS Final Rule. This policy outlines the requirements for Member placement and service planning for Members eligible for ALTCS.

- Updated to current policy formatting guidelines
- Additional definitions have been added and revised
- Guidance for members requesting Temporary Out-of-State HCBS Services has been added
- A new section for AHCCCS reporting requirements has been added

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: August 2, 2023

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

Revised Policies:

310-B Title XIX/XXI Behavioral Health Services

Updates/or Summary:

This policy has been revised to describe the Division of Developmental Disabilities (Division) responsibilities for providing Title XIX/XXI Behavioral Health Services to Members who are eligible for Arizona Long Term Care System (ALTCS), including additional requirements for Members that have chosen the DDD Tribal Health Program (THP) as their health plan to include:

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

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: July 26, 2023

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

Revised Policies:

1630 Administrative Standards

Updates/or Summary:

This a newly revised policy that establishes administrative responsibilities related to Support Coordination for Division Members who are eligible for the Arizona Long Term Care System (ALTCS) or Targeted Support Coordination (TSC). This policy was revised to:

- Align with AHCCCS requirements
- Align with Division formatting requirements
- The Support Coordinator qualifications have been updated to better align with AHCCCS policy
- A section regarding the Division's role in monitoring the Support Coordination program has been added

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: July 19, 2023

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

New Policies:

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

Updates/or Summary:

This policy has been developed to outline requirements for the provision of medically necessary dental services for Members of the Division of Developmental Disabilities (Division) who are age 21 and older to include:

- General covered dental services for Members who are 21 years of age or older
- Outlining which services are not subject to the \$1,000 dental limit
- Emergency dental services for Members age 21 and older
- Adult emergency dental services limitations
- Division and FFS program responsibilities
- Notification requirements for charges to Members
- Facility and anesthesia charges
- Informed consents and treatment plans for Members

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

Updates/or Summary:

This policy has been developed to establish the requirements regarding the provision of medically necessary dental services for members in the Arizona Long Term Care Program (ALTCS) to include:

- General requirements
- Services that do not count towards the ALTCS \$1,000 limit
- Division oversight
- Facility and anesthesia charges
- Informed consent and treatment plans for Members
- Notification requirements for charges to Members

1290 Behavioral Health Advocacy

Updates/or Summary:

This new Division policy sets forth guidance for a support the Division can provide to members who experience unique challenges of navigating systems of care while experiencing behavioral health challenges. This policy outlines when and how referrals are made to an Adult or Child Behavioral Health Advocate, and explains the development of a Behavioral Health Advocacy Plan.

Revised Policies:

1620-E Service Plan Monitoring and Reassessment Standards

Updates/or Summary:

This policy establishes the requirements for service plan monitoring and reassessment visits for Members who are eligible with Arizona Long Term Care Services (ALTCS).

- The policy has been updated to align with current policy formatting requirements
- Definitions have been added and revised
- The section regarding Behavioral Health Serious Mental Illness (SMI) has been integrated into the policy and is no longer its own section.

Retired Policies:

310-D Dental Services

Updates/or Summary:

- Division Medical 310-D has been retired as it has been incorporated into new policies 310-D1 and 310-D2.

Division of Developmental Disabilities
Division Medical Policy
Manual Revision History

Date: June 28, 2023

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

Retired Policies:

310-O Maternal and Child Health Services

Updates/or Summary:

- Division Medical 310-O has been retired as it is duplicative to Division Medical Chapter 400.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: June 7, 2023

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

New Policy:

310-GG Nutritional Therapy Metabolic Foods and Total Parenteral Nutrition

Updates/or Summary:

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

Division of Developmental Disabilities
Division Medical Policy
Manual Revision History

Date: May 31, 2023

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

Revised Policy:

1240-E Habilitation Services and Day Treatment Services

Updates/or Summary:

- This policy has been revised to align with the HCBS final rule.
- This policy outlines the requirements for and describes covered Hourly and Daily Habilitation services and Day Treatment Services for Division Members who are eligible for Arizona Long Term Care Services (ALTCS).
- The policy has been updated to align with current policy formatting requirements
- Excludes services no longer covered by the Division
- Employment services are now covered in Division Medical Policy 1240-J

Division of Developmental Disabilities
Division Medical Policy
Manual Revision History

Date: May 10, 2023

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

Revised Policy:

310-M Immunizations

Updates/or Summary:

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

Division of Developmental Disabilities
Division Medical Policy
Manual Revision History

Date: April 26, 2023

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

Revised Policy:

310-DD Covered Transplants and Related Immunosuppressant Medications

Updates/or Summary:

- Formatting throughout the document to align with the policy standard.
- Added a section about Hematopoietic Stem Cell Transplants when outlining transplant types for Members aged 21 and older.
- Deleting the phrase "as part of the Second Level Review" when outlining the Division's role in reviewing the quality and outcome data published for Out-of-Network facility.
- Deleted the word "requests" and inserted the word "denials" when outlining the Division Medical Director completing a Second Level Review for transplant services and transplant related services.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: April 21, 2023

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

New Policy:

1240-J Employment Services

Updates/or Summary:

- This policy establishes requirements regarding the provision of employment services and support services for Division members enrolled in the Arizona Long Term Care Services (ALTCS) program. Details include:
 - The Division shall participate in the Employment First Initiative and provide employment services and supports while applying this philosophy.
 - The Division shall assess and authorize Pre-Employment services when members need these services.
 - The Division shall assess and authorize Post-Employment services when members need these services.

Revised Policies:

1230-C Community Residential Settings and Room and Board

Updates/or Summary:

- This policy has been revised and updated to cover residential settings and room and board. The title of the policy has been changed from "Room and Board" to "Community Residential Settings and Room and Board." The revision includes the addition of a Purpose statement, a Definition section, and policy sections regarding Community Residential Settings; Adult and Child Developmental Homes and Child Developmental Certified Homes; Group Homes, Nursing Supported Group Homes, and Enhanced Behavioral Group Homes. The revision of the Room and Board section includes the provision that providers shall comply with HCBS settings rule requirements outlined in Provider Policy Manual, Chapter 2.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: March 1, 2023

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

New Policy:

520 Member Transitions

Updates/or Summary:

- This policy establishes requirements applicable to the Division of Developmental Disabilities (Division) to identify and facilitate Member transitions between the Administrative Services Subcontractors (AdSS), the Division and other AHCCCS contractors and the Division's oversight of the AdSS to include:
 - Member Transitions
 - Notification requirements
 - Coordination activities
 - Transition from child to adult services
 - Members hospitalized during enrollment change
 - Transition during major transplantation services
 - Enrollment changes for Members receiving outpatient treatment
 - Medically necessary transportation
 - Transition of prescription medication services
 - Disposition of medical equipment, appliances, and medical supplies during transition.
 - Medical records transfer
 - Therapeutic foster care
 - Division oversight responsibilities

Revised Policies:

310-DD Transportation for Physical and Behavioral Health Services

Updates/or Summary:

- This policy outlines the coverage for transplants, related services, and immunosuppressant medications to include:
 - General information
 - Covered Transplants
 - Covered Transplant services
 - Conditions for Transplantation
 - Transplant services and settings
 - Transplant care coordination

- Organ Transplant eligibility

320-B Member Participation in Experimental Services and Clinical Trials

Updates/or Summary:

- This policy describes the responsibilities related to Experimental Services and Qualifying Clinical Trials for Arizona Long Term Care System (ALTCS) eligible members to include:
 - Participation in clinical trials
 - Coverage determination

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: February 22, 2023

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

Revised Policy:

310-BB Transportation for Physical and Behavioral Health Services

Updates/or Summary:

- This policy has been revised to align with the AMPM 310-BB. This is a revised policy that describes covered transportation services for Physical and Behavioral Health services for ALTCS members. The title of the policy was changed from "Transportation" to "Transportation for Physical and Behavioral Health Services" to differentiate the difference between transportation provided by Health Plans vs. DDD under long term care and support. Formatting and language was updated throughout the policy to reflect current Policy Unit standards. Language was updated throughout the policy for clarity. Information was added that prior authorization is not required for emergency transportation. The section regarding transporting a member to participate in local community-based support programs was removed to align with changes to AMPM 310-BB.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: January 25, 2023

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

New Policy:

1301 Agency with Choice

Updates/or Summary:

- This new policy outlines requirements for the Agency with Choice (AWC) Member-directed service delivery model option as specified in A.A.C. R9-28-509. The policy includes the roles and responsibilities of members, support coordinators, and provider agencies under Agency with Choice.

Revised Policy:

1020 Utilization Management

Updates/or Summary:

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

Division of Developmental Disabilities
Division Medical Policy
Manual Revision History

Date: January 18, 2023

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

New Policy:

590 Behavioral Health Crisis and Care Coordination

Updates/or Summary:

- This policy describes the requirements related to the behavioral health Crisis system for Arizona Long Term Care System (ALTCS) eligible members. This policy includes: medically necessary services and care are provided to members following a Crisis episode.
- Financially responsible for services after the initial 24 hours of a Crisis episode
- Emergency and non-emergency transportation from Crisis receiving facilities
- Publication of Crisis Services
- Care coordination
- Post-Crisis care coordination

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: December 21, 2022

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

Revised Policies:

320-I Telehealth and Telemedicine

Updates/or Summary:

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

680-C Pre-Admission Screening and Resident Review

Updates/or Summary:

This policy has been developed to outline the Division of Developmental Disabilities (Division) role in the Pre-Admission Screening and Resident Review (PASRR) requirements with the Intergovernmental agreement to include:

- Division requirements
- Residential review process
- Administrative review process

Retired Policies:

320-E Health and Behavior Intervention

Reason for Retirement:

- AHCCCS policy has been retired and CPT codes that make up the policy are no longer

valid.

550 Member Records and Confidentiality

Reason for Retirement:

- The information in this policy is now located in several other policies

810 Retrospective Review

Reason for Retirement:

- The information in this policy is now located in Division Medical 1020.

1240-H Home Health Aide

Reason for Retirement:

- This service is covered under the acute care plans and the requirements are in Division and AdSS Medical 310-I.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: December 7, 2022

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

Revised Policy:

310-I – Home Health Services

This policy was completely re-written to update the language and formatting for clarity and to reflect current Policy Unit standards. Definitions for "Face to Face Encounter," "Home Health Agency," and "Licensed Health Aide" were added. Additional details were added to the section for home health agencies to say the Division covers medically necessary home health services. New details about intermittent nursing/home health services, licensed health aide, therapy services, medical equipment, appliances and supplies as well as new details about face to face encounters have been added. The section about travel expenses, meals, lodging and transportation was deleted as the information is obsolete.

910 – Quality Management/Performance Improvement Scope

- Adds language describing the QM/PI program in more detail including information about the QMPI Committee and its subcommittees
- Adds language to address the Division's oversight and monitoring of the AdSS and address evaluation and continuous quality improvement
- Adds language conforming to AMPM concerning delegation to address issue raised in the recent operational review

980 – Performance Improvement Projects

- Adds a section describing the Division's oversight and monitoring activities
- Updates references for AHCCCS website location of reporting templates and checklists (removing old references to attachments that AMPM eliminated).

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: November 9, 2022

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

New Policy:

1302 – Independent Provider Program

Updates/or Summary:

- This is a new Policy, developed to outline requirements for the Division's Independent Provider Program.

Revised Policy:

310-M – Immunizations

Updates/or Summary:

- Ensuring members receive behavioral health case management
- Participation in CFT/ART
- Assessment of intensity level for Provider Case Management
- Effective treatment and support services for members
- Development of a provider network
- Coordination and communication between Provider Case Management and AdSS care management teams
- Development of Case Management Plans

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: October 26, 2022

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

New Policy:

310-C – Breast Reconstruction Following Mastectomy

Updates/or Summary:

- This policy has been developed to align with the AMPM 310-C. This new policy describes covered breast reconstruction surgery services following a mastectomy for DDD members who are eligible for ALTCS.

Revised Policy:

310-M – Immunizations

Updates/or Summary:

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

1240-D – Emergency Alert System

Updates/or Summary:

- Clarifies the criteria that must be met for Members to receive and use Emergency Alert System (EAS) equipment.
- Specifies the Administrative Services Subcontractor's (AdSS) responsibility to provide EAS for Members enrolled AdSS health plans
- Specifies AHCCCS' responsibility to provide EAS for Members enrolled in the Tribal Health Program

- Adds the Support Coordinator's role in coordinating EAS for Members.
- Updates the document to align with DDD's policy formatting standards.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: September 14, 2022

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

New Policies:

962 – Reporting and Monitoring of Seclusion and Restraint

Updates/or Summary:

- Sets forth who must report
- Describes the Division's responsibility to submit reports to AHCCCS through the portal and to IOCs.
- Describes the Division's mechanisms for oversight, monitoring, tracking and trending.

Revised Policy:

1240-G – Skilled Nursing and Licensed Health Aide Services

Updates/or Summary:

- Aligns with changes made in AMPM 1024-G
- Duplicative language was removed throughout the Policy for clarity and better understanding.
- A new section for Licensed Health Aide Services was added
- Revisions were made to identify the requirements for skilled nursing and Licensed Health Aide services.

1240-G-1 – Exhibit Skilled Nursing Matrix

Updates/or Summary:

- Additional skilled nursing tasks were made to the 1240-G-1 Exhibit.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: July 20, 2022

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

New Policies:

1021 – Care Management

Updates/or Summary:

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

1023 – Disease/Chronic Care Management

Updates/or Summary:

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

Revised Policy:

1020 – Utilization Management

Updates/or Summary:

- Restructure of 1020 to define UM functions (Data management, Concurrent Review, Discharge Planning, Prior Authorization, Inter-rater Reliability, Clinical Practice Guidelines, New Medical Technology/New Uses for existing Medical Technology) and moved Care Management, Disease/Chronic Care Management, Pharmacy, Justice Program to separate policies.
- Provides concurrent guidelines aligned with AHCCCS requirement for UM functions
- Oversight of UM functions is more detailed to align with AHCCCS requirements.

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: July 13, 2022

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

New Policy:

1024 – Drug Utilization Review

Updates/or Summary:

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

Revised Policy:

320-M – Medical Marijuana and CBD Oil Products

Updates/or Summary:

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

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: June 29, 2022

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

New Policy:

280 – Transition to Adulthood

Updates/or Summary:

- This policy has been developed pursuant to the Division's contractual obligations to AHCCCS as an AHCCCS Contractor. This policy is specifically targeted to the Division's Behavioral Health Administration in relation to their role with oversight of the AdSS's delegated duties and the role of support coordination to ensure a smooth and seamless transition to adulthood.

Revised Policy:

960 – Quality of Care Concerns

Updates/or Summary:

- Makes conforming changes to AMPM
- Adds detail about documenting, evaluating, and resolving QOCs, including more detail about when site visits must be conducted.
- Expands on requirements for staff training and provides more detail about inter-rater reliability (IRR) for incident review and QOC investigation
- Removes a section regarding behavioral health providers' duty to warn that does not apply to the Division
- Adds language to address that Division's oversight of the AdSS including more robust language about tracking and trending of QOCs, the role of the peer review committee, and the obligation to report QOCs to the Independent Oversight Committees (IOCs)

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: June 22, 2022

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

Revised Policy:

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

Updates/or Summary:

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

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

Updates/or Summary:

- Explains end-of-life care concept, advance planning, and advance directives
- Provides that the Division will oversee the AdSS to ensure that the AdSS provider network, provider staff and appropriate AdSS staff have training on end-of-life care concept, advance planning, and advance directives.
- Sets forth how the Division will provide oversight and of the AdSS activities

580 – Behavioral Health Referral Process

Updates/or Summary:

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

Division of Developmental Disabilities

Division Medical Policy

Manual Revision History

Date: June 8, 2022

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

Revised Policy:

410 – Maternity Care Services

Updates/or Summary:

- Policy was revised to better align with the AMPM
- Updated definitions list
- The AdSS and Provider requirements were moved to the AdSS policy
- Additional language pertaining to monitoring and oversight of the AdSS

411 – Women's Preventive Care Services

Updates/or Summary:

- Policy was revised to better align with the AMPM
- Updated definitions list
- The AdSS and Provider requirements were moved to the AdSS policy
- Additional language pertaining to monitoring and oversight of the AdSS

420 – Family Planning Services and Supplies

Updates/or Summary:

- Policy was revised to better align with the AMPM
- Updated definitions list
- The AdSS and Provider requirements were moved to the AdSS policy
- Additional language pertaining to monitoring and oversight of the AdSS

430 – Early and Periodic Screening, Diagnostic and Treatment Services

Updates/or Summary:

- Policy was revised to better align with the AMPM
- Updated definitions list

- The AdSS and Provider requirements were moved to the AdSS policy
- Additional language pertaining to monitoring and oversight of the AdSS

431 – Dental/Oral Health Services for EPSDT Eligible Members

Updates/or Summary:

- The definition section was updated
- Refers to AdSS Medical 431 for specific AdSS requirements

Division of Developmental Disabilities
Division Medical Policy Manual
Revision History

Date: May 18, 2022

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

New Policy:

940 – Medical Records and Communication of Clinical Information

Updates/or Summary:

- Describes the content requirements for medical records maintained by providers
- Explains the contents of a designated record set (which is HIPAA term) and the legal requirements for record keeping
- Explains the Division's oversight of the AdSS responsibilities to audit provider records in order to ensure provider compliance with record keeping requirements
- Describes how the Division looks for opportunities for making improvements to the quality and content of medical records based on the AdSS audits

Revised Policy:

310-DD – Covered Organ Transplants and Related Immunosuppressant Medications

Updates/or Summary:

- Multiple changes were made to align the policy with the current AHCCCS process for transplants.
- Updated list of covered transplants
- Updated covered transplant services
- Included coordination with United Network for Organ Sharing (UNOS) and the Organ Procurement and Transplant Network (OPTN).

950 – Credentialing and Recredentialing Processes

Updates/or Summary:

- Makes conforming changes to AMPM
- Adds detail about what constitutes a complete credentialing file
- Removes sections that do not apply to the Division because the Division does not credential these provider types (therapeutic foster care, teaching physicians, teaching dentist).
- Adds language to address the Division's oversight of the AdSS

Division of Developmental Disabilities
Division Medical Policy Manual
Revision History

Date: May 11, 2022

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

New Policy:

961 – Incident, Accident, and Death Reporting

Updates/or Summary:

- This policy sets forth when vendors must report to appropriate authoritative agencies, time frames associated with reporting urgent, emergency, and routine incidents. Oversight by the Division of reporting, reviewing, and monitoring of IADs involving members; and Division monitoring of the AdSS activities through reports filed with the Division.

Division of Developmental Disabilities
Division Medical Policy Manual
Revision History

Date: May 4, 2022

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

New Policies:

210 – Working with the Birth through Five Population

Updates/or Summary:

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

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

Updates/or Summary:

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

Division of Developmental Disabilities

Division Medical Policy Manual

Revision History

Date: April 20, 2022

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

Revised/New Policy:

920 Quality Management/Performance Improvement Program Administrative Requirements

Updates/or Summary:

- Added definitions for performance measures, performance standards, quality management unit, quality improvement team & work plan evaluation.
- Removed definition for statistically significant
- Health disparity summary & evaluation report incorporated into policy
- Best practices & follow up on previous year's external quality review report recommendations.

966 Immediate Jeopardy

Updates/or Summary:

- Addresses steps to take when a potential IJ situation is identified by AHCCCS or the Division.
- Responsibilities delegated to the AdSS
- The circumstances when members might be relocated from a facility
- Investigation, evaluation, and resolution of IJ findings
- Tracking and trending of incidents
- Analysis, review, and discussion of IJ data at the monthly Quality Management subcommittee meeting, the monthly Performance Improvement Monitoring subcommittee meeting, and the quarterly Quality Management Program Improvement committee meeting.

Division of Developmental Disabilities
Division Medical Policy Manual
Revision History

Date: April 6, 2022

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

Revised/New Policy:

320-V Behavioral Health Residential Facilities

Updates/or Summary:

- "American Indian Health Plan" changed to "Tribal Health Program."
- Updates throughout the policy to align with the Tribal Health Program and AHCCCS integration on April 1, 2022.
- New definition and section regarding Secured Behavioral Health Residential Facilities incorporated into the policy pursuant to ARS 36-425.06(B).
- "member/guardian/designated representative" changed to "member/responsible person" throughout the policy.
- Removal of references to Tribal ALTCS
- Updates to language regarding prior authorization and notification.

Division of Developmental Disabilities
Division Medical Policy Manual
Revision History

Date: April 1, 2022

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

Revised/New Policy:

320-G Lung Volume Reduction Surgery

Updates/or Summary:

- A purpose section was added
- A definitions section was added
- Contact information was added to obtain prior authorization for covered services
- The authorizing agency for Tribal Health Program (THP) members was updated to reflect the THP integration

Division of Developmental Disabilities
Division Medical Policy Manual
Revision History

Date: March 9, 2022

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

Revised/New Policy:

970 – Performance Measures

Updates/or Summary:

- Revised to reflect CYE 2021 contract amendment changes related to definitions (adds a definition for Performance Measure Performance Standards – PMPS) and reporting.
- Clarifies the Division's oversight role in monitoring the AdSS activities, evaluating their performance results and reporting them to AHCCCS in accordance with contractual requirements.

1620-A – Initial Contact/Visit Standards

Updates/or Summary:

- Clarifies that an in-person on-site visit to initiate the Person-Centered Service Plan shall be done by the Support Coordinator within ten (10) working days of the member's enrollment notification.

970 – Performance Measures

Updates/or Summary:

- The definition section was updated.
- Specifies that Support Coordination is responsible for ensuring documentation is done in a professional, factual, and objective manner.
- Specifies the member/responsible person shall be given a copy of the signed planning document after each meeting.

Division of Developmental Disabilities
Division Medical Manual Policy
Revision History

Date: February 23, 2022

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

Revised/New Policy:

1620-G Behavioral Health Standards

Updates/or Summary:

- American Indian Health Plan changed to Tribal Health Program
- Member/guardian/designated representative changed to member/responsible person throughout the policy
- Language added "For members residing in a non-behavioral health setting refer to AdSS Medical Policy 310-R for information on acute behavioral health situations."

Division of Developmental Disabilities
**Division Medical Policy Revision
History**

Date: February 16, 2022

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

Revised Policy:

1620-D Placement and Service Planning for ALTCS Eligible Members

Updates/or Summary:

- Updating the policy title
- Identifies the Support Coordinators responsibility in assisting ALTCS eligible members with locating a primary care physician (PCP) if needed.
- An eMCR is not needed when reporting a change in the PCP
- Information regarding the Contingency/Back-up Plan has been added.

Division of Developmental Disabilities

Division Medical Policy Revision History

Date: February 2, 2022

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

Revised/New Policy:

320-W Therapeutic Foster Care for Children

Updates/or Summary:

- ***American Indian Health Plan*** was changed to ***Tribal Health Program***
- The following sentence: ***Care and services provided in TFC are based on a per diem rate (24-hour day), require prior and continued authorization, and do not include room and board*** was changed to: ***Care and services provided in TFC are based on a per diem rate (24-hour day) and do not include room and board***. "Require prior and continued authorization" was removed.

320-X Adult Behavioral Health Therapeutic Homes

Updates/or Summary:

- ***American Indian Health Plan*** was changed to ***Tribal Health Program***
- The following sentence: ***Care and services provided in an ABHTH are based on a per diem rate (24-hour day), require prior and continued authorization, and do not include room and board*** was changed to: ***Care and services provided in an ABHTH are based on a per diem rate (24-hour day) and do not include room and board***. "Require prior and continued authorization" was removed.

1620-K Skilled Nursing Need Standard

Updates/or Summary:

- This policy was developed to meet an AHCCCS requirement to establish procedures for support coordination for members with skilled nursing needs.

Division of Developmental Disabilities

Medical Policy Manual

Revision History

Date: December 29, 2021

The policy identified below may be viewed by accessing the [Policy & Rules](#) screen on the Division's website. Please send any questions to DDDPolicy@azdes.gov.

REVISED POLICY

1620-G, Behavioral Health Standards

Description:

- American Indian Health Plan (AIHP) changed to Tribal Health Program (THP)
- Member/guardian/designated representative changed to member/responsible person throughout the policy.
- Language added, "For members residing in a non-behavioral health setting refer to AdSS Medical Policy 310-R, *Nursing Facility Services* for information on acute behavioral health situations."

Division of Developmental Disabilities

Medical Policy Manual

Revision History

Date: October 6, 2021

The policy identified below may be viewed by accessing the [Policy & Rules](#) screen on the Division's website. Please send any questions to DDDPolicy@azdes.gov.

NEW POLICY

1620-0 Abuse, Neglect, And Exploitation Reporting Standard

Description:

This is a new policy that identifies mandatory reporters and their responsibility for the care of a child or a vulnerable adult as mandatory reporters. This policy also identifies the need for mandatory reporters who have a reasonable basis to suspect that abuse or neglect or exploitation of the member has occurred must report such information immediately to a peace officer or protection services worker, (i.e., DES/Adult Protective Services (APS), Department of Child Safety, Tribal Social Services).

Details:

- Mandatory reporters include medical professionals, psychologists, social workers, Support Coordinators, peace officers, and other people who have the responsibility for the care of a child or a vulnerable adult.
- The process in which Division staff shall take when there is suspicion of abuse and/or neglect of a minor or vulnerable adult.
- Includes a list of needed information that is required when reporting any suspicions/allegations of abuse, neglect, or exploitation of an adult member to Adult Protective Services (APS).
- The Support Coordinator shall cooperate with and complete any follow-up necessary for the Division to resolve a Quality-of-Care Concern.

REVISED POLICY

320-P, Serious Mental Illness Eligibility Determination

Description:

This policy has been revised to change the name from the DDD American Indian Health Plan to the DDD Tribal Health Program (THP)

Division of Developmental Disabilities

Medical Policy Manual

Revision History

Date: October 1, 2021

The policy identified below may be viewed by accessing the [Policy & Rules](#) screen on the Division's website. Please send any questions to DDDPolicy@azdes.gov.

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

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

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

REVISED POLICIES

- 300 - Chapter Overview
- 310-B - Title XIX/XXI Behavioral Health Services
- 310-BB - Transportation
- 310-F - Emergency Medical Services
- 320-F - HIV AIDS Treatment Services
- 320-G - Lung Volume Reduction Surgery
- 320-O - Behavioral Health Assessments and Treatment/Service Planning
- 320-S - Behavior Analysis Services
- 320-W - Therapeutic Foster Care for Children
- 320-X - Adult Behavioral Health Therapeutic Homes
- 410 - Maternity Care Services
- 411 - Women's Preventative Care Services
- 420 - Family Planning
- 430 - Early Periodic Screening, Diagnostic and Treatment Services
- 431 - Oral Health Care EPSDT – Age Members
- 1250-E - Therapies (Rehabilitative and) Habilitative
- 1620-G - Behavioral Health Standards

Division of Developmental Disabilities

Medical Policy Manual

Revision History

Date: September 15, 2021

The policy identified below may be viewed by accessing the [Policy & Rules](#) screen on the Division's website. Please send any questions to DDDPolicy@azdes.gov.

REVISED POLICY

980, Performance Improvement Projects

Reason for changes:

To update requirements established by AHCCCS for Performance Improvement Projects

Description:

This policy delineates the purpose, design, implementation, and reporting of AHCCCS-mandated and Division self-selected Performance Improvement Projects (PIPs) by the Division.

Details:

- Added definition for Plan-Do-Study-Act.
- Added language to describe the Plan-Do-Study-Act cycle for quality improvement.
- Modified language throughout the policy for clarity and to align with AMPM changes.
- Updated formatting and content to conform with Policy Unit standards.

Division of Developmental Disabilities

Medical Policy Manual

Revision History

Date: September 8, 2021

The policy identified below may be viewed by accessing the [Policy & Rules](#) screen on the Division's website. Please send any questions to DDDPolicy@azdes.gov.

NEW POLICY

1620-L - Anti-Retaliation

Description:

This is a new policy that has been created to establish requirements for member case file documentation.

Details:

- Identifies the need to keep and maintain case files secure.
- Outlines the requirements for progress notes
- The Division is committed to correcting wrongdoing.
- Identified what information should be documented and/or stored in the case file. This includes all progress notes, Person Centered Service Plans, legal documentation such as guardianship documents, medical and educational records, and other assessments that may be relevant to the member.1620-L, Case File Documentation

1620-N – Service Closures and Case Closure

Description:

This is a new policy that has been created to identify reasons an ALTCS covered service may be ended and specifies the steps needed when case closure is necessary for a member currently enrolled with the Division.

Details:

- Identifies various reasons for when a service closure would be appropriate.
- Identifies various reasons for when a case closure would be appropriate
- Provides guidance on how to properly notify the member/responsible person and/or AHCCCS of the closure.
- Outlines the required documentation when a service or case is closed.

REVISED POLICY**1620-D – Service Closure and Case Closure****Description:**

This is a revised policy that establish to outline the requirements for member placement and service planning.

Details:

- This policy has been revised to incorporate pages 10 and 11, showing the tables that outline the required review cycles as they vary depending on the member's program eligibility.

Division of Developmental Disabilities

Medical Policy Manual

Revision History

Date: August 4, 2021

The policy identified below may be viewed by accessing the [Policy & Rules](#) screen on the Division's website. Please send any questions to DDDPolicy@azdes.gov.

REVISED POLICY

1010, Medical Management Administrative Requirements

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

NEW POLICY

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

This policy has been developed as part of the Operational Review and applies to the Division as a Managed Care Organization for the American Indian Health Plan. Its purpose is to ensure ALTCS eligible members enrolled in a DDD Health Plan or American Indian Health Plan meet established criteria for out-of-state placement for behavioral health treatment.

580, Behavioral Health Referral and Intake Process

This policy has been developed as part of the Operational Review and applies to the Division as a Managed Care Organization for the American Indian Health Plan. Its purpose is to ensure Title XIX eligible members enrolled in a DDD Health Plan or American Indian Health Plan, with behavioral health and substance use disorders, have an established behavioral health referral and intake process to obtain prompt access to behavioral health services. The policy also establishes the Division's responsibility to provide monitoring and oversight of its DDD Health Plans to ensure AdSS are following AdSS Medical Policy 580.

1020, Medical Management Scope and Components

This policy has been developed as part of the Operational Review to ensure Division compliance with the AHCCCS contract. Its purpose is to establish the medical management scope and components designed to assure appropriate utilization of health care resources.

Division of Developmental Disabilities

Medical Policy Manual

Revision History

Date: July 14, 2021

The policy identified below may be viewed by accessing the [Policy & Rules](#) screen on the Division's website. Please send any questions to DDDPolicy@azdes.gov.

NEW POLICY

320-P Serious Mental Illness Eligibility Determination

This policy was developed in compliance with the Division's AHCCCS Contract and responsibilities for the American Indian Health Plan to ensure SMI Eligibility determinations are available to its members when needed. The policy also includes the Division's oversight of DDD Health Plans with respect to SMI eligibility Determinations.

Division of Developmental Disabilities

Medical Policy Manual

Revision History

Date: July 6, 2021

The policy identified below may be viewed by accessing the [Policy & Rules](#) screen on the Division's website. Please send any questions to DDDPolicy@azdes.gov.

REVISED POLICIES

Division Medical Policy 1610, Guiding Principles and Components of Support Coordination

This policy has undergone substantial revisions due to the recent implementation of the new Person Centered Service Plan. The revisions align Division policy with AHCCCS policy and AHCCCS location.

Division Medical Policy 1640, Targeted Support Coordination Standards

This policy has undergone substantial revisions due to the recent implementation of the new Person Centered Service Plan. The revisions may assist member/family to better understand Targeted Support Coordination. The revisions align Division policy with AHCCCS policy and AHCCCS location.

NEW POLICIES

Division Medical Policy 1620-A, Initial Contact

This is a new policy developed to establish the requirements for the initial contact and visit standards for Division members enrolled in Arizona Long Term Care Services (ALTCS). This policy is being implemented due to the new Person Centered Service Plan. This policy aligns Division policy with AHCCCS policy.

Division Medical Policy 1620-B, Needs Assessment

This is a new policy developed to establish the requirements for the needs assessment and care planning. This policy is being implemented due to the new Person Centered Service Plan. This policy aligns Division policy with AHCCCS policy.

Division Medical Policy 1620-C, Cost Effectiveness Study (CES)

This is a new policy developed to establish the requirements that Home and Community Based Services (HCBS) provided under the ALTCS Program must be cost-effective when compared to the cost of providing care to the member in an institutional setting. This policy is being implemented due to the new Person Centered Service Plan. This policy aligns Division policy with AHCCCS policy.

Division Medical Policy 1620-D, Placement and Service Planning

This is a new policy developed to establish the requirements that outlines the requirements for member placement and service planning. This policy is being implemented due to the new Person Centered Service Plan. This policy aligns Division policy with AHCCCS policy.

Division Medical Policy 1620-E, Service Plan Monitoring and Reassessment Standards

This is a new policy developed to establish the requirements for Service Plan monitoring and reassessment visits for members eligible With Arizona Long Term Care Services (ALTCS). This policy is being implemented due to the new Person Centered Service Plan. This policy aligns Division policy with AHCCCS policy.

Division Medical Policy 1650, Division Only Eligibility (DD-Only) Support Coordination Standards

This is a new policy developed to outline the responsibilities Support Coordination has for members who are eligible for the Division but do not qualify for Arizona Long Term Care System (ALTCS) or Targeted Support Coordination AHCCCS/Title XIX or Title XXI. This policy aligns Division policy with AHCCCS policy.

Division of Developmental Disabilities

Medical Policy Notification

Date: June 16, 2021

The policy identified below may be viewed by accessing the [Policy & Rules](#) screen on the Division's website. Please send any questions to DDDPolicy@azdes.gov.

Revised Policy

320-V, Behavioral Health Residential Facilities

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

New Policy

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

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

Division of Developmental Disabilities

Medical Policy Notification

Date: June 9, 2021

The policy identified below may be viewed by accessing the [Policy & Rules](#) screen on the Division's website. Please send any questions to DDDPolicy@azdes.gov.

Revised Policy

1240-G, Home Nursing

Added a Definitions section. Clarified language regarding the Service Settings and Service Requirements, and the responsibilities of the Primary Care Provider and the Division Nurse. Added instructions on how to implement the new Hourly Nursing Assessment Tool (H-NAT). Made general grammatical and sentence structure updates and revisions for clarity and consistency purposes.

Division of Developmental Disabilities
Medical Policy Notification

Date: May 24, 2021

The policy identified below may be viewed by accessing the [Policy & Rules](#) screen on the Division's website. Please send any questions to DDDPolicy@azdes.gov.

Revised Policy

100-D, Definitions

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

300, Chapter Overview

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

1250-E, Therapies (Rehabilitative/Habilitative)

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

Division of Developmental Disabilities

Medical Policy Notification

Date: March 24, 2021

The policies identified below may be viewed by accessing the [Policy & Rules](#) screen on the Division's website. Please send any questions to DDDPolicy@azdes.gov.

New Policy:

320-W, Therapeutic Foster Care for Children

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

320-X, Adult Behavioral Health Therapeutic Homes

This is a new policy developed to establish the requirements for the provision of care and services to ALTCS eligible members in Adult Behavioral Health Therapeutic Homes, including members enrolled in the American Indian Health Plan.

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

Date: March 17, 2021

Revision Effective Date: March 17, 2021

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

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

New Policies

310-B Title XIX/XXI Behavioral Health Services

This is a new Division policy developed in response to an Operational Review audit and AHCCCS compliance. It outlines the Division's responsibilities for providing Title XIX/XXI behavioral health services to ALTCS eligible members, including requirements for American Indian Health Plan members.

320-S Behavior Analysis Services

This is a new Division policy developed in response to an Operational Review audit and AHCCCS compliance. It outlines the Division's responsibilities for providing Behavior Analysis Services to ALTCS eligible members, including requirements for American Indian Health Plan members.

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

Date: March 3, 2021

Revision Effective Date: March 3, 2021

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

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

Revised Policy:

Chapter 1620-G Behavioral Health Standards

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

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

Date: March 3, 2021

Effective Date: March 3, 2021

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

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

New Policy:

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

This is a new Division policy regarding behavioral health assessments and treatment/service planning for ALTCS eligible members, including additional requirements for American Indian Health Plan members. This policy was developed as part of the Operational Review.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Medical Policy Manual Notification

Approval Date: 10/28/2020

Revision Effective Date: 10/28/2020

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

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

1230-A, Assisted Living Facilities

Revised Policy:

- Policy purpose statement added
- Definition of Alternative Home and Community Based Services Setting added
- Definition of Assisted Living Facility added
- Member and/or guardian changed to member/responsible person
- Individual Support Plan/Person Centered Plan changed to Planning Document

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Medical Policy Manual Notification

Approval Date: 10/28/2020

Revision Effective Date: 10/28/2020

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

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

810, Retrospective Review

Revised Policy

- Changed the title from ***Utilization Management Review*** to ***Retrospective Review***
- Removed information regarding delegating responsibilities to the Health Plans.
- Added substantive information related to the retrospective medical reviews of specified claims to verify appropriateness and effectiveness of service utilization aligning with the Utilization Management department current practices.

Please send any questions to DDDPolicy@azdes.gov

Division of Developmental Disabilities

Medical Policy Manual Notification

Approval Date: 10/28/2020

Revision Effective Date: 10/28/2020

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

1040, Outreach, Engagement, and Reengagement for Behavioral Health

Revision Details:

- Removed the words "and Closure" from the policy title
- Definition section added
 - Definitions related to policy content and aligned with AHCCCS accordingly
- Policy section and language added to address critical activities related to service delivery within AHCCCS System of Care.
- Additional language was modified and expanded throughout the policy to ensure all requirements in AMPM 1040 are outlined and that the Division policy language aligned with AMPM Policy 1040.
 - Community Outreach Section:
 - Subpoint E. Expanded language for further clarity
 - Added language at end of section: Behavioral health providers shall participate in engagement, reengagement, and follow-up processes as described in this policy.
 - Engagement section:
 - Added language to introduction paragraph
 - "and/or Case Manager of the TRBHA, IHS, Tribally Operated 638, or Urban Native Health Facility"
 - Reengagement section
 - Added language to introduction paragraph:
 - "and/or Case Manager of the TRBHA, IHS, Tribally Operated 638, or Urban Native Health Facility"
 - "Provider Case Managers are available to assist Support Coordinators with reengaging members as deemed beneficial to their care."
 - Added Subpoint A to outline how a behavioral health provider shall attempt to reengage a member.
 - Follow-up After Significant and/or Critical Events section:
 - Added language:
 - "District nurses are available to assist Support Coordinators as considered beneficial to optimally meeting the needs of the individual member during their care transition."

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.

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

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

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:

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

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:

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.

Please send any questions to DDDPolicy@azdes.gov.
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.

Please send any questions to DDDPolicy@azdes.gov.
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.
-

Please send any questions to DDDPolicy@azdes.gov.
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.
-

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.
-

Please send any questions to DDDPolicy@azdes.gov.
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.
-

Please send any questions to DDDPolicy@azdes.gov.
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.
-

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.
-

Please send any questions to DDDPolicy@azdes.gov.
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.
-

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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.
-

Please send any questions to DDDPolicy@azdes.gov.
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.
-

Please send any questions to DDDPolicy@azdes.gov.
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).
-

Please send any questions to DDDPolicy@azdes.gov.
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.
-

Please send any questions to DDDPolicy@azdes.gov.
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.
-

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

Date: November 22, 2017

Revision Effective Date: November 22, 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.

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.
-

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

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.

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.

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.
-

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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 RECREDENTIALING 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.
