

6003-K CLAIM DISPUTES

REVISION DATES: 9/25/2024, 10/1/2021, 5/24/2021, 5/27/2020,
10/1/2019, 8/28/2019, 5/29/2019, 6/10/2016, 1/15/2016, 3/2/2015

REVIEW DATE: 10/19/2023

EFFECTIVE DATE: July 31, 1993

REFERENCES: A.R.S. §§ 36-2903.01(B)(4) and 41-1092.01; A.A.C.
R9-34-402 and R9-34- 405, ACOM 203.

PURPOSE

This policy outlines the Division's responsibilities when Providers File a Claim Dispute for Medicaid covered services rendered to the Division's members.

DEFINITIONS

1. "Administrative Decision" means the same as defined in A.R.S. § 12-901(2).
2. "Administrative Services Subcontractors" or "AdSS" means an organization or entity that has a capitated contract with the Division of Developmental Disabilities (Division) to provide goods and services to its members either directly or through subcontracts with Providers, in conformance with contractual requirements, Arizona statutes, Arizona rules, federal law, and

federal regulations.

3. "Arizona Health Care Cost Containment System" or "AHCCCS" means Arizona's Medicaid Program, approved by the Centers for Medicare and Medicaid Services (CMS) as a Section 1115 Waiver Demonstration Program and described in A.R.S. Title 36, Chapter 29
4. "Business Day" means 8:00 a.m. to 5:00 p.m., Monday through Friday, excluding holidays listed in A.R.S. § 1-301.
5. "Calendar Day" means every day of the week including weekends and holidays.
6. "Claim Dispute" means a dispute, filed by a Provider or DDD service Provider, whichever is applicable, involving payment of a claim, denial of a claim, imposition of a sanction, or reinsurance.
7. "Contractor" means the following:
 - a. A contractor or program contractor as defined in A.R.S. § 36- 2901(1);
 - b. The Comprehensive Health Plan (CHP) in the Department

of Economic Security; and

- c. The Children's Rehabilitation Services and Behavioral Health Services in the Arizona Department of Health Services.
8. "Director" means the Director of the AHCCCS Administration or the AHCCCS Administration designee.
 9. "Director's Decision" means the final administrative decision under A.R.S. § 41-1092(5).
 10. "Filed" means the date the Division receives a request established by a date stamp on the request or other record of receipt.
 11. "Provider" means any individual or entity contracted with the Division that is engaged in the delivery of services, or ordering or referring for those services, and is legally authorized to do so by the State.
 12. "State Fair Hearing" means an administrative hearing under Arizona Revised Statutes, Title 41, Chapter 6, Article 10.

POLICY

A. REQUIREMENTS FOR FILING A CLAIM DISPUTE

1. The Division shall accept a written Claim Dispute from a Provider that specifies in detail:
 - a. The factual and legal basis for the Claim Dispute;
 - b. The relief requested is related to a claim for payment of authorized-covered services; or
 - c. For the denial of a claim for reimbursement of services that may contest the validity of any adverse action, decision, policy implementation, or rule resulting in the full or partial denial of the claim.
2. The Division shall accept Claim Disputes from a Provider that are Filed with the Division within:
 - a. 12 months from the:
 - i. Ending date(s) of service;
 - ii. Date of the Member's eligibility posting;
 - iii. Date of discharge from a hospital.
 - b. 60 days after the date of the denial of a timely claim submission, whichever is later.

3. The Division shall process all Claim Disputes upon receipt.
4. The Division shall send the Provider a written notice acknowledging receipt of the Claim Dispute within the five Business Days immediately following the Division's date of receipt.
5. The Division shall inform the Provider that they have 10 Calendar Days from the acknowledgment notice to submit any additional information to the Division for consideration regarding the Claim Dispute.
6. The Division may contact the Provider to obtain additional information when the Division requires additional information to make an Administrative Decision.
7. The Division shall consider and review any relevant Arizona Revised Statutes, Arizona Administrative Codes, AHCCCS policies, and Division policies when drafting the Administrative Decision.
8. The Division shall inform the Provider that they may request a fair hearing by submitting a written request to the Office of Administrative Review (OAR) within the 30 Calendar Days

following the Division's dated receipt of the Notice of Decision.

B. EXTENSIONS

The Division shall issue a letter to the Provider when both parties mutually agree to extend the decision deadline either to allow additional time for the Division to make a decision or to allow the service Provider to submit supporting documentation.

C. NOTICE OF DECISION

1. The Division shall send a Notice of Decision to the Provider within 30 Calendar Days from the Division's date of receipt unless the parties mutually agree to a deadline extension.
2. The Division shall provide a Notice of Decision that complies with the following relevant regulatory and contractual requirements:
 - a. The date of the decision;
 - b. The factual and legal basis for the decision;
 - c. The Provider's right to request a fair hearing;
 - d. The instructions for requesting a fair hearing; and
 - e. Any other documentation that may be relevant and can contribute to the Administrative Decision.

D. OVERTURNED OR REVERSED CLAIM DISPUTES

1. The Division shall reprocess and pay both overturned and reversed Claim Disputes within the 15 Business Days following the date of the decision as stated in ACOM 203.
2. The Division shall pay interest on late payments as outlined in Division Operations Policy 203.

E. STATE FAIR HEARINGS FOR CLAIM DISPUTES

1. The Division shall accept requests for a Fair Hearing in writing by:
 - a. Email - dddofficeofcompliance@azdes.gov
 - b. Mail - 1789 W Jefferson St.

Mail Drop 2HE5

Phoenix, AZ 85007

2. The Division shall provide a copy of the request for a Fair Hearing to DES Appellate Services Administration and the Attorney's General's Office within the five Business Days immediately following the Division's dated receipt of the request for a Fair Hearing.
3. The Division shall authorize payment and pay for the services as

when the Division receives an adverse decision and decides a review will not be petitioned.

F. PETITION FOR A REHEARING OR A REVIEW

1. The Division may seek judicial review of the AHCCCS decision through the court system when the Division receives an adverse Administrative Decision.
2. The Division shall seek legal advice from the Attorney General's Office to determine if a petition for review should be filed.
3. The Division shall file a petition for a rehearing or a review with the AHCCCS Office of Administrative Legal Services (OALS) when the Division has been advised to do so by legal counsel.
4. The Division shall submit the petitions for a rehearing or a review in writing to OALS:

AHCCCS Office of Administrative Legal Services

801 East Jefferson Street

Phoenix, AZ 85034

G. MONITORING AND OVERSIGHT

1. The Division shall require the Administrative Service

Subcontractors (AdSS) to develop and maintain claims processes and systems that ensure the accurate collection and processing of claims, analysis, integration, and reporting of data.

2. The Division shall require the AdSS to comply with the Claims Disputes process as outlined in ACOM Policy 203.