

Chapter 2 PROVIDER RESPONSIBILITIES AND EXPECTATIONS

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REFERENCES: A.A.C R6-6-1001; A.A.C R6-6-1101; 42 CFR 438.100; 45 CFR parts 160 and 164; Service Specifications; DDD Rules; ALTCS Rules

National Provider Identifier

All providers must have a valid AHCCCS identification number. If applicable, the provider must also have a National Provider Identifier (NPI), proper licensure according to state and federal regulations, and documentation indicating compliance with local fire and sanitation codes and regulations.

Member's Privacy and Security

All providers must ensure each member's privacy is protected, in accordance with the privacy requirements in 45 CFR parts 160 and 164.

45 CFR 160.203 General rule and exceptions:

- A. To prevent fraud and abuse related to the provision of or payment for health care
- B. To ensure appropriate State regulation of insurance and health plans to the extent expressly authorized by statute or regulation
- C. For State reporting on health care delivery or costs
- D. For purposes of serving a compelling need related to public health, safety, or welfare, and, if a standard, requirement, or implementation specification under part 164 of this subchapter is at issue, if the Secretary determines that the intrusion into privacy is warranted when balanced against the need to be served

45 CFR 164.306 Security standards: General rules.

- A. General requirements. Covered entities and business associates must do the following:
 - a. Ensure the confidentiality, integrity, and availability of all electronic protected health information the covered entity or business associate creates, receives, maintains, or transmits.
 - b. Protect against any reasonably anticipated threats or hazards to the security or integrity of such information.
 - c. Protect against any reasonably anticipated uses or disclosures of such information that are not permitted or required under subpart E of this part.
 - d. Ensure compliance with this subpart by its workforce.

Member's Rights

Qualified Vendors and Independent Providers will:

- A. Provide services in a manner that supports and enhances the member's independence, self-esteem, mutual respect, value, and dignity.
- B. Actively participate in the member's Planning Team meeting at the date, time, and location determined by the Division.
 - 1. The Planning Team may agree to have the provider(s) or health plan staff participate in the Planning Team meeting via phone or WebEx when technology allows for it if the meeting location will not accommodate a large number of participants and to take into consideration the travel time for the provider.
- C. Meet with the member and, if applicable, the primary caregiver prior to initiating service and obtain necessary information.
- D. Administer first aid and appropriate attention to injury or illness.
- E. Report incidents in accordance with the Division's Policy Manual.
- F. As required, submit progress reports and teaching strategies (including measurable data to validate the effectiveness of the service) to aid the Support Coordinator in assessing the continued need for the service.
- G. Notify the Support Coordinator to request a Planning Team meeting whenever there is a significant change in the member's status.
- H. Complete other assignments as determined by the Planning Team.
- I. Provide services as authorized by the Division.

Qualified Vendors and Independent Providers will adhere to the member rights as outlined in 42 CFR 438.100, including the right to;

- A. Be treated with dignity and respect,
- B. Receive information on available treatment options and alternatives, presented in a manner appropriate to the member's condition and ability to understand,
- C. Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation,
- D. Request and receive a copy of his or her medical records, and to request that they be amended or corrected, as specific in 45 CFR part 164 and applicable state law,
- E. Exercise his or her rights and that exercise of those rights must not adversely affect service delivery to the member.