

PREFACE – INTENDED USERS OF THE PROVIDER MANUAL

REVISION DATE: 10/16/2024, 9/4/2024, 8/28/24, 8/7/2024, 7/31/2024, 5/29/2024, 5/8/2024, 5/1/2024, 2/28/2024, 12/6/2023, 10/1/2021, 7/14/2017, 5/31/2017 EFFECTIVE DATE: May 26, 2017

The Division provides all Home and Community Based Services (HCBS) for members except Physical Therapy for members aged 21 and over and members receiving therapy services through a Multi-Speciality Interdisciplinary Clinic (MSIC). The Division contracts with Health Plans to provide all Behavioral Health services, Physical Health services, Physical therapy to members aged 21 and over, and services provided through an MSIC.

As specified in the table below, the Provider Policy Manual applies to these intended users:

- Tribal Health Program/Fee-For-Service (THP/FFS) providers
- Qualified Vendors/Qualified Vendor Applicants (QV/QVA)
- Acute Health Plans/Administrative Services Subcontractors (Acute/AdSS)
- Independent Providers

C	Chapter # / Title	THP/FFS	QV/QVA	Acute/AdSS	Independent Providers
1	Introduction to the Division of Developmental Disabilities	x	x	x	x
2	Provider Responsibilities and Expectations		x		Х
3	Provider Customer Service and Network Support	x	x	X	X
4	Covered and Non-Covered Services	x	X	х	X
5	Emergency Room Utilization	х	х	x	Х
6	Early and Periodic Screening, Diagnostic, and Treatment	x		x	
7	Dental/Oral Health Care	x	х	х	Х
8	Family Planning	х		х	
9	PCP Assignments	х		х	
10	Referrals to Specialists	х		х	



C	hapter # / Title	THP/FFS	QV/QVA	Acute/AdSS	Independent Providers
11	ALTCS Inquiries, Grievances, Claim Disputes, and Appeals	x			x
12	Billing and Claim Submission	Х	х	x	х
13	Utilization Management	х	х	x	х
16	Remittance Advice, Eligibility, and Cost Sharing	х	Х	х	X
17	Prior Authorization Requirements	х	х	x	х
18	Claims Medical Review	х	Х	x	х
19	Concurrent Review	x		x	
20	Fraud, Waste, and Abuse	х	х	x	х
22	Pharmacy Services	x		x	
23	Appointment Standards	х	х	x	х
24	Americans with Disabilities Act	х	х	x	Х
25	Eligibility Verification			x	
26	Cultural Competency and Member and Family Centered Care	x	x	x	×
27	Peer Review and Inter-Rater Reliability	х		х	
28	Member Rights	х	x	x	x
29	Advising or Advocating on Behalf of a Member	x	х	x	x
30	Clinical Practice Guidelines	х	х	x	x
31	Change of Contractor			x	
34	Provider Publications		х		



Chapter # / Title		THP/FFS	QV/QVA	Acute/AdSS	Independent Providers
35	Reporting Requirements for Progress Reports and Other Documentation		X		X
36	Fire Safety		x		
37	Therapy Services (Occupational, Physical, and Speech-Language)		x		
38	Emergency Communication When Transporting a Member		x		x
40	Insurance Requirements for Qualified Vendors		x		
41	Termination of the Qualified Vendor Agreement Upon Request of the Qualified Vendor		X		
42	Electronic Monitoring in Program Sites		х		
43	Respite Provided at Camp to ALTCS Members		х		
46	Agency With Choice		x		
47	Managing Vendor Call Lists, Vendor Directories, Scope of Services and Reporting Requirements	X	x		X
48	Credentialing of Contracted Providers		х		х
49	Responsible Driving		x		x
50	Vendor Call Requirements for Qualified Vendors		x		
51	Oversight and Monitoring of Developmental Home Services		x		



Chapter # / Title		THP/FFS	QV/QVA	Acute/AdSS	Independent Providers
52	Habilitation Staffing Schedule Requirements and Annual Review		x		x
53	Supporting Children in Care of the Department of Child Safety in Community Residential Settings		×		
54	Group Home Requirements		x		
57	Third Party Liability Waiver Requests		x		
58	Medication Management Services	X		x	
59	Benefit Coordination and Fiscal Responsibility for Behavioral Health Services and Physical Health Services	X		x	
60	Required Notifications		х		х
61	Home and Community Based Services (HCBS) Certification and AHCCCS Provider Enrollment	Х	X	X	X
62	Electronic Visit Verification		x		x
63	Workforce Development		x		
64	Preventing Member Abuse, Neglect, and Exploitation		x		
65	Providing Out of State Services		x		x
66	Behavioral Health	x	Х	x	
67	General and	х	х	Х	X



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Informed Consent				
68 Advance Directives	х	х	x	x
69 Care Coordination	x	х	x	x
70 Qualified Vendor Incident Reporting		x		x
71 Life Safety Inspection	x	x	x	x
Appx A QV Provider Instructions - Agency with Choice Option DDD		X		
Appx B Agency with Choice User Guide - FOCUS Vendor Medicaid		x		
Appx C Encounter Data Validation		x	X	x