



Division of Developmental Disabilities

POLICY REVISION HISTORY

Division Provider Manual

November 13, 2024	April 10, 2024
October 16, 2024	February 28, 2024
September 4, 2024	February 7, 2024
August 28, 2024	January 10, 2024
August 7, 2024	January 3, 2024
July 31, 2024	December 27, 2023
July 10, 2024	December 6, 2023
May 29, 2024	November 22, 2023
May 22, 2024	October 25, 2023
May 15, 2024	August 23, 2023
May 8, 2024	August 16, 2023
May 1, 2024	July 26, 2023
	July 19, 2023
	May 24, 2023
	May 10, 2023
	April 21, 2023
	March 29, 2023
	March 22, 2023
	January 25, 2023
	December 21, 2022
	December 7, 2022
	November 9, 2022
	October 26, 2022
	September 28, 2022
	September 21, 2022
	September 7, 2022
	August 10, 2022
	July 13, 2022



Division of Developmental Disabilities

POLICY REVISION HISTORY

Division Provider Manual

June 29, 2022	November 4, 2020	September 22, 2017
June 24, 2022	July 1, 2020	September 15, 2017
June 15, 2022	March 4, 2020	July 14, 2017
June 8, 2022	October 1, 2019	June 23, 2017
May 18, 2022	September 11, 2019	June 9, 2017
May 11, 2022	August 28, 2019	May 31, 2017
March 30, 2022	August 1, 2019	May 26, 2017
March 9, 2022	July 31, 2019	May 5, 2017
March 2, 2022	June 26, 2019	April 28, 2017
January 19, 2022	May 8, 2019	November 10, 2016
November 24, 2021	April 3, 2019	October 14, 2016
October 6, 2021	January 16, 2019	August 12, 2016
October 1, 2021	December 26, 2018	August 5, 2016
September 22, 2021	October 1, 2018	June 17, 2016
September 15, 2021	August 22, 2018	June 10, 2016
August 5, 2021	August 15, 2018	May 27, 2016
July 28, 2021	June 27, 2018	May 13, 2016
July 14, 2021	June 20, 2018	January 29, 2016
June 2, 2021	May 30, 2018	May 1, 2015
May 24, 2021	May 16, 2018	April 17, 2015
March 24, 2021	April 25, 2018	April 6, 2015
March 3, 2021	April 18, 2018	April 6, 2015
February 24, 2021	March 7, 2018	April 1, 2015
January 27, 2021	February 14, 2018	September 15, 2014
December 9, 2020	January 3, 2018	August 1, 2014
November 12, 2020	December 13, 2017	April 16, 2014

Division of Developmental Disabilities

Provider 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:

Chapter 46 Agency With Choice

Updates/or Summary:

This is a revised policy that outlines the requirements when using the Agency With Choice (AWC) Member directed service delivery model.

Description of changes:

- The Definition section was updated into include the definition of "Individual Representative"
- Information was added to include the Qualified Vendor's roles and responsibilities around partnership agreements, communications, support, managing, training, supervision or DCW, AWC authorization.
- A Supplemental Information section was added to provide information regarding the Agency with Choice program and the Division's support for Direct Care Workers.

Chapter 54 Group Home Requirements

Updates/or Summary:

This is a revised policy that outlines the requirements for Qualified Vendors when providing Group Home services for Division Members.

Description of changes:

- The policy's formatting and wording was improved throughout the policy.
- The Qualified Vendor shall ensure a member has an approved Behavior Plan is in place for Members within 90 days of move-in and approved annually as outlined in the Division's Behavior Support Policy Manual and A.A.C. R6-6-904
- The Qualified Vendor shall have a process in place to prevent a lapse in licenses.
- The Qualified Vendor shall not permit adults and children to live together, unless specific criteria in this policy is met.
- The Qualified Vendor shall be required to maintain records for 12 months for Members in the home.
- Provides information on how the Qualified Vendor shall submit information to the Division and notify the Division when a member is moved.

Division of Developmental Disabilities Provider Manual Revision History

Date: October 16, 2024

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

Revised Policies:

Preface Intended Users of the Provider Manual

Updates/or Summary:

The Provider Preface has been revised to include name updates of publishing Provider Manual Chapter 35 Reporting Requirements for Progress Reporting and Other Documentation.

Chapter 35 Reporting Requirements for Progress Reporting and Other Documentation

Updates/or Summary:

This policy has been revised to establish reporting requirements for Providers. The Division has:

- Changed the title of the policy from "Progress Reporting Requirements" to "Reporting Requirements for Progress Reports and Other Documentation."
- Added Purpose statement.
- Added Definitions section.
- Updated Elements of Progress Reports, Progress Reports Submission Instructions, and Progress Reports Schedule and Reporting Requirements sections.
- Added new provisions, removed unnecessary provisions, and updated existing language throughout the policy to align with AHCCCS requirements.
- Added Supplemental Information.
- Updated language, formatting, and style throughout the policy to align with the Division's Policy Format Manual.

Division of Developmental Disabilities Provider Manual Revision History

Date: September 4, 2024

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

Revised Policies:

Preface Intended Users of the Provider Manual

Updates/or Summary:

The Provider Preface has been revised to include name updates of publishing Provider Manual documents, including:

- Chapter 61 Home and Community Based Services (HCBS) Certification and AHCCCS Provider Enrollment

Chapter 61 Home and Community Based Services (HCBS) Certification and AHCCCS Provider Enrollment

Updates/or Summary:

Provider Chapter 61 HCBS Certification and AHCCCS Provider Enrollment has been updated to provide improved clarification and guidance for providers of HCBS services, as well as to better align with AMPM 610, updates include:

- Improved guidance for Qualified Vendors submitting applications for HCBS certification;
- Requirements for staff certification and training;
- Staff Roster compliance
- When a Life Safety Inspection is required;
- Corrective Action Plan (CAP) information;
- Guidance for when and how to amend an HCBS certificate;
- Guidance for renewing an HCBS certification, with guidance on associated timelines and emphasis that a renewal request must be submitted for each individual group home, and, the "Submit" button must be hit at the end of each request.
- Guidance is provided for vendors who are:
 1. Contracted with both AHCCCS and the Division; and
 2. Providers who are contracted with AHCCCS but not the Division, who still need HCBS certification.
 3. AZEIP providers.

Division of Developmental Disabilities Provider 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:

Preface Intended Users of the Provider Manual

Updates/or Summary:

The Provider Preface has been revised to include name updates of publishing Provider Manual documents, including:

- Chapter 8 Family Planning, previously Family Planning and Supplies
- Chapter 25 Eligibility Verification, previously Enrollment Verification

Chapter 6 Early and Periodic Screening, Diagnostic, and Treatment

Updates/or Summary:

Chapter 6 has been revised with the following:

- Added immunization requirements

Chapter 8 Family Planning

Updates/or Summary:

Chapter 8 has been revised with updated formatting. Content remains the same.

Chapter 9 PCP Assignments

Updates/or Summary:

Chapter 9 has been revised with updated formatting. Content remains the same.

Chapter 11 ALTCS Inquiries, Grievances, Claim Disputes, and Appeals

Updates/or Summary:

Chapter 11 has been revised with the following updates:

- Added correct Chapter title in footer of document
- Added Review Date to document

Chapter 17 Prior Authorization Requirements

Updates/or Summary:

Chapter 17 has been revised with the following:

- Removed procedural language
- Updated format
- Updated references
- Updated program description

Chapter 25 Eligibility Verification

Updates/or Summary:

Chapter 25 has been revised with the following:

- Removed procedural language
- Updated format
- Updated purpose
- Added Prior Quarter Coverage & Prior Period Coverage

Division of Developmental Disabilities

Provider 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.

New Policies:

Chapter 71 Life Safety Inspection

Updates/or Summary:

This new policy has been developed to clarify the Division's Life-Safety Inspection (LSI) standards to ensure services are provided in a safe and healthy environment. This policy establishes the Division's Life-Safety Inspection (LSI) standards to ensure services are provided in a safe and healthy environment and outlines the requirements for Providers to apply these standards to Developmental Homes, Therapy Services, Day Services, Center-Based Employment, Group Supported Employment Services, and In-Home Respite Services in the provider's home.

Revised Policies:

Preface Intended Users of the Provider Manual

Updates/or Summary:

The Provider Preface has been updated with the following:

- Revised table to remove State-Contracted Developmental Home
- Removed the word "Individual" from "Individual Independent Providers" which now reads "Independent Providers"
- Updated table to add: Chapter 71 Life Safety Inspection

Chapter 9 PCP Assignments

Updates/or Summary:

Chapter 9 has been revised to include "The AdSS shall allow Providers to request a PCP assignment roster and make the roster available within 10 business days of receipt of the request, and include, at a minimum:

- a. Assigned members' names,
- b. Assigned members' date of birth,
- c. Assigned members' AHCCCS ID,
- d. AHCCCS ID of the assigned PCP, and
- e. Effective date of member assignment to the PCP"

Chapter 10 Referrals to Specialists

Updates/or Summary:

Provider Manual Chapter 10 Referrals to Specialists was updated to include the following:

- Formatting was updated to meet Division standards
- Removed Behavioral Health Referrals section
- Updated information on Coordination of Care for Behavioral Health Medication Management
- Coordination of Care information referred to Division Medical Policy Manual Chapter 510.

Chapter 24 Americans with Disabilities Act

Updates/or Summary:

This policy previously consisted of a brief statement and has been expanded to provide better clarification of expectations for the Division's Qualified Vendors in compliance with the Americans with Disabilities Act. New sections include:

Reasonable Modifications

Provides guidance for the QV to develop ADA policies and processes that support compliance with the ADA, including:

- Provision of information to Responsible Persons on how to make a request for a Reasonable modification to the QV.
- How requests made to the QV shall be tracked, to include how the QV responds.
- What to do when the QV determines a request is not reasonable.
- Requirement that the QV designate one staff person to coordinate ADA concerns, when the QV employs 50+ employees.

Communication Support

- Provides guidance on how QVs are expected to provide support to Members who need communication aids and supports.

Accessibility of Programs and Services

- Advises QVs to ensure Division Members are not excluded from any program, service, or activity because existing buildings and facilities are inaccessible.

Mobility

- Discusses permitting use of wheelchairs and manually-powered mobility aids, such as walkers, crutches, canes, braces, or other similar devices designed for use by Members with mobility disabilities

New Construction and Alteration of existing facilities

Overviews guidance for making facilities physically accessible.

Division of Developmental Disabilities Provider Manual Revision History

Date: July 31, 2024

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

Revised Policies:

Preface Intended Users of the Provider Manual

Updates/or Summary:

The Provider Preface has been updated with the following:

- Name change of publishing Provider policies
- Removed "Policy" from title in header, which now reads "Provider Manual"

Chapter 6 Early and Periodic Screening, Diagnostic, and Treatment

Updates/or Summary:

This policy has been revised with the following changes:

- Removed procedural language
- Reformatted document with new layout. Reduced page number from 33 to 8 pages
- Removed definitions unrelated to the purpose of the document
- Added to the list of EPSDT coverages
- Updated EPSDT Visit Components
- Updated Provider requirement

Chapter 8 Family Planning and Supplies

Updates/or Summary:

This policy has been revised with the following changes:

- Removed procedural language
- Reformatted document with new layout
- Updated Maternity Care Services
- Updated Family Planning Services and Supplies

Chapter 20 Fraud, Waste, and Abuse

Updates/or Summary:

This policy has been revised to outline requirements for Qualified Vendors regarding prevention, detection, and reporting requirements for any and all suspected incidents of Fraud, Waste, and Abuse.

- Updated References.
- Refined Purpose statement.
- Removed unnecessary definitions, updated existing definitions, and added new definitions.
- Removed Prevention and Detection section.
- Added new provisions, removed unnecessary provisions, and updated existing language throughout the policy to align with AHCCCS requirements.
- Added Supplemental Information.
- Updated language, formatting, and style throughout the policy to align with the Division's Policy Format Manual.

Chapter 30 Clinical Practice Guidelines

Updates/or Summary:

Provider Manual Chapter 30 was updated to include the Administrative Services Subcontracted (AdSS) health plans and language was changed to improve clarity.

Chapter 62 Electronic Visit Verification

Updates/or Summary:

This policy was updated to correct an error in the footer. Previously written as "Chapter 26", the footer text was corrected to "Chapter 62 Electronic Visit Verification".

Chapter 67 General and Informed Consent

Updates/or Summary:

Provider Manual Chapter 67 was updated to include the removal of the evaluation in connection with an AHCCCS school-based program, and definitions were updated for clarity.

Division of Developmental Disabilities Provider 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.

Revised Policies:

Chapter 50 Vendor Call Requirements for Qualified Vendors

Updates/or Summary:

Chapter 50 has been updated to remove a strikethrough. Content of this policy remains the same.

Chapter 66 Behavioral Health

Updates/or Summary:

This policy has been revised to reflect recent AHCCCS policy updates and compliance requirements for applicable AHCCCS Standards including:

- Updates and clarifying language added to the following sections:
- Duty to Warn
- SMI Housing
- Outreach, Engagement, and Re-engagement for Behavioral Health
- Pre-Petition Screening, Court-Ordered Evaluation and Court-Ordered Treatment
- SMI appeal process

"Serious Emotional Disturbance" determination added for children under the age of 18.
New section added regarding out-of-state placements for Behavioral Health treatment.
Several sections removed from the policy that are now located in other Provider policies.
Minimal content reorganization for better flow of information

Chapter 68 Advance Directives

Updates/or Summary:

This policy has been revised to ensure processes are in place for hospitals, nursing facilities, hospice providers, residential service providers, and home health care or personal care services to comply with Federal and State laws regarding Advance Directives for Adult Members. [42 U.S.C. §1396(a)(57)].

- Removed an unnecessary definition and added new definitions.
- Updated language and formatting and style throughout the policy to align with the Division's Policy Format Manual.

Division of Developmental Disabilities
**Provider 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:

Preface Intended Users of the Provider Policy Manual

Updates/or Summary:

The preface has been updated to remove Chapter 21 False Claims Act, which is being retired.

Retired Policies:

Chapter 21 False Claims Act

Updates/or Summary:

Provider Manual Chapter 21 is being retired as information is duplicative, information can be found in Provider Chapter 20.

Division of Developmental Disabilities Provider 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:

Chapter 58 Medication Management Services

Updates/or Summary:

Provider Manual Chapter 58 was updated to provide supplemental information on medication management services. Updates include:

- Updated information about PCPs treating physical and behavioral conditions based on AHCCCS contract updates.
- Updated information about PCPs prescribing medications for treating substance abuse disorders (SUDs).
- Removed information that is found in Division and AdSS Medical Manuals 310-V as well as 510.

Division of Developmental Disabilities

Provider Manual Revision

History

Date: May 15, 2024

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

Revised Policies:

Chapter 41 Termination of the Qualified Vendor Agreement Upon Request of the Qualified Vendor

Updates/or Summary:

Provider Manual Chapter 41 has been updated to correct a typo on Page 3, Section 2, b. Policy text has been corrected to the following: "Include assurance that the QV will assist with transitioning Members to alternate providers."

Chapter 50 Vendor Call Requirements for Qualified Vendors

Updates/or Summary:

Provider Manual Chapter 50 has been updated to better clarify Vendor Call Requirements, changes include:

- Definitions for "Behavioral Supported Group Home" and "Planning Team" have been updated.
- Formatting has been updated to current standards.
- Clarification of requirements for Supported Living services, and Expansions has been added.

Division of Developmental Disabilities Provider 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.

Revised Policies:

Preface Intended Users of the Provider Policy Manual

Updates/or Summary:

The preface has been updated to include the revised name of Chapter 60. Required Notifications, previously *Notification to Qualified Vendors*.

Chapter 28 Member Rights

Updates/or Summary:

This policy has been updated to provide updated Division Member Rights information, as well as to better clarify Provider responsibilities.

Changes include:

Added definitions and clarified guidance for Division Providers.

Chapter 60 Required Notifications

Updates/or Summary:

This policy has been updated to better align with AHCCCS requirements, as well as to reflect current policy language and formatting standards for better readability.

Description of changes:

This policy was previously titled "Notifications to Qualified Vendors." Content changes were minimal, however, provide better readability of expectations for Required Notifications.

Division of Developmental Disabilities Provider 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:

Preface Intended Users of the Provider Policy Manual

Updates/or Summary:

The preface has been updated to include the revised name of Chapter 41. Termination of the Qualified Vendor Agreement Upon Request of the Qualified Vendor, previously *Termination of a Qualified Vendor Agreement Upon Request of the Qualified Vendor*.

Chapter 4 Covered and Non-Covered Services

Updates/or Summary:

Provider Manual Chapter 4 was updated to provide supplemental information on covered and non-covered services located in the AHCCCS AMPM. Some definitions were removed, as well as information that can be found in other policies. Information was added for Providers to refer to the AHCCCS website for the DDD THP Fee for Service Plan as well.

Chapter 5 Emergency Room Utilization

Updates/or Summary:

Provider Manual Chapter 5 updated to provide supplemental information on emergency services, encourage providers to educate Members on appropriate utilization of emergency rooms and urgent care centers, and provide examples of minor problems that do not require an emergency room visit.

Chapter 13 Utilization Management

Updates/or Summary:

Provider Manual Chapter 13 was updated to provide supplemental information on the utilization of services throughout the Division. Information was removed and is now located in other policies. Formatting was updated to improve readability.

Chapter 19 Concurrent Review

Updates/or Summary:

Provider Manual Chapter 19 was updated to provide supplemental information on the Concurrent Review process. Updates include:

- Definitions were added to the policy
- Information about concurrent reviews and frequency for conducting concurrent reviews was added.
- Information was removed that is found in other policies.
- Supplemental information was updated to provide additional information on concurrent reviews, payments the Division prohibits, and when AdSS will report to AHCCCS and conduct a quality of care investigation.

Chapter 23 Appointment Standards

Updates/or Summary:

This policy has been revised as a Supplemental Information to outline the Appointment accessibility and availability standards and the Division's oversight and monitoring of the Administrative Services Subcontractors (AdSS) to ensure compliance with the Division's network sufficiency requirements. This document outlines the process for the Division to report Service Provider Appointment accessibility and availability to the Arizona Health Care Cost Containment System (AHCCCS) and the Division's Administrative Services Subcontractors (AdSS).

Chapter 41 Termination of the Qualified Vendor Agreement Upon Request of the Qualified Vendor

Updates/or Summary:

Provider Manual Chapter 41, Termination of the Qualified Vendor Agreement Upon Request of the Qualified Vendor was revised with the following changes:

- Adds a purpose statement to the policy.
- Adds definitions to the policy.
- Clarifies and updates the requirements Qualified Vendors must meet when requesting termination of the Qualified Vendor Agreement.

Chapter 52 Habilitation Staffing Requirements and Annual Review

Updates/or Summary:

Provider Manual Chapter 52, Habilitation Staffing Schedule Requirements and Annual Review, was revised with the following changes:

- Updates the purpose statement to apply to Group Homes and Supported Living.
- Adds definitions to the policy.
- Clarifies and updates the requirements Qualified Vendors must meet for developing and maintaining habilitation staffing schedules.

Division of Developmental Disabilities Provider 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.

Revised Policies:

Chapter 1 Introduction to the Division of Developmental Disabilities

Updates/or Summary:

This policy has been updated with new definitions as well as updated definitions. Program descriptions have been updated to reflect changes that have been made to qualifying diagnoses. Policy had clarifying language throughout to improve readability.

Division of Developmental Disabilities

Provider 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.

Revised Policies:

Chapter 40 Insurance Requirements for Qualified Vendors

Updates/or Summary:

Provider Manual Policy Chapter 40, Insurance, was revised with the following updates:

- Updates the title of the policy to "Insurance Requirements for Qualified Vendors".
- Adds a purpose statement to the policy.
- Adds a requirement for Qualified Vendors to submit insurance coverage documents to the Department's insurance tracking and monitoring portal.
- Adds requirement for Qualified Vendors that provide therapy services to carry Sexual Abuse and Molestation Insurance coverage for Members who receive therapy services without a caregiver present.

Retired Policies:

Chapter 33 Assessment Requirement for Members Placed in Residential Settings

Updates/or Summary:

This policy has been retired as information has been integrated into Division Provider Policy Manual Chapter 54, published on 2/7/2024.

Division of Developmental Disabilities Provider 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:

Chapter 54 Group Home Requirements

Updates/or Summary:

Provider Manual Chapter 54, Group Home Requirements was revised with the following changes:

- Updates definitions and requirements to align with the new RFQVA.
- Adds requirements for obtaining and maintaining records of Members residing in Group Homes.

Chapter 65 Providing Out of State Services

Updates/or Summary:

This policy provides guidance to Qualified Vendors and Providers for providing Medicaid services to Members who are eligible for Arizona Long Term Care System (ALTCS) and are Temporarily Out of State and need Medicaid services to support them out of state.

Division of Developmental Disabilities

Provider 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:

Chapter 53 Supporting Children in the Care of the Department of Child Safety in Community Residential Settings

Updates/or Summary:

This policy has been revised regarding the restriction of a Child Developmental Home License and a likely eligible child. Those revisions include:

- The language in Sections C.4. and C.5. was removed and the following language was added, "Restrict a Child Developmental Home license if a Likely Eligible Child is found to be ineligible for the Division."
- Minor sentence restructuring and formatting to improve readability.

Division of Developmental Disabilities
**Provider 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:

Chapter 22 Pharmacy Services

Updates/or Summary:

This policy has been revised as Supplemental Information to explain how pharmacy services are administered by the Division and the Administrative Services Subcontractors (AdSS) for Division Members and by the Prescription Benefit Manager (PBM) for Tribal Health Plan (THP) Members.

Division of Developmental Disabilities

Provider Manual Revision History

Date: December 27, 2023

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

Revised:

Chapter 2 Provider Responsibilities and Expectations

Updates/or Summary:

The revisions to Provider Manual Policy Chapter 2, Provider Responsibilities and Expectations are as follows:

- Updates and adds definitions in the policy to align with RFQVA DDD-2024.
- Adds requirements for background checks and criminal history checks for Direct Support Professionals and Direct Care Workers.

Chapter 37 Therapy Services (Occupational, Physical, and Speech-Language)

Updates/or Summary:

Provider Manual Policy Chapter 37, Therapy Services (Occupational, Physical, and Speech-Language) was revised with the following updates:

- Updates the policy to align with RFQVA DDD-2024.
- Updates definitions relevant to the policy.
- Adds a section on EPSDT services.

Division of Developmental Disabilities
**Provider Manual Revision
History**

Date: December 6, 2023

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

Revised:

Preface – Intended Users of the Provider Policy Manual

Updates/or Summary:

The Preface of the Provider policy Manual has been updated.

Division of Developmental Disabilities
**Provider 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.

Revised Policies:

Chapter 29 – Advising or Advocating on Behalf of a Member

Updates/or Summary:

This policy has been revised as a Supplemental Information to outline the context when the Division may not prohibit, or otherwise restrict, a provider acting within the lawful scope of practice, from advising or advocating on behalf of a Member.

Division of Developmental Disabilities
**Provider 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:

Chapter 57 – Third Party Liability Waiver Requests

Updates/or Summary:

Revisions to Provider Chapter 57 are as follows:

- The definitions of "Third Party" and "Third Party Liability" were updated to align with AHCCCS.

Division of Developmental Disabilities
**Provider 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:

Chapter 32 – Separation of Children and Adults in Center Based Programs

Updates/or Summary:

This policy is being retired because all relevant provisions have been incorporated in the Policy Development tool and other provisions are obsolete.

Division of Developmental Disabilities Provider 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:

Chapter 7 – Dental/Oral Health Care

Updates/or Summary:

This policy has been revised to provide information to Qualified Vendors regarding the provision of medically necessary dental services for Division of Developmental Disabilities (Division) Members age 21 and older. This document also provides information for medically necessary, routine dental services for Division Arizona Long Term Care System (ALTCS) for Members aged 21 and older and covered medically necessary dental services for Members under 21 years of age to include:

- Definitions for Member and Physician Service
- Updating the statement of medically necessary dental services as a prerequisite to AHCCCS-covered organ or tissue transplantation only after a transplant evaluation determines the Member is appropriate.
- Updating the statement for coverage of dental cleanings in hospital settings
- Adding a section on Emergency Dental Services limitations for Member age 21 and older
- Adding a section on AdSS and Fee-for-Services program responsibilities
- Updating when an informed consent for oral health treatment will be completed
- Updating Contractor and Tribal ALTCS responsibilities
- Formatting to align with Policy standards

Division of Developmental Disabilities Provider 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:

Chapter 26 – Cultural Competency and Member and Family Centered Care

Updates/or Summary:

- Updates include clarification of requirements for provision of Interpretation and Translation services to Members, to support compliance with state and federal policies.
- Guidance includes description of how services are to be delivered for Prevalent Non-English Languages, and addresses guidance regarding interpretation provision when adults and minors accompany Members.
- Emphasis is placed on need for Translation of documents to only be provided by a Qualified Translator.
- Guidance has also been clarified for provider workforce training and ongoing education.

Division of Developmental Disabilities Provider 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:

Chapter 54 – Group Home Requirements

Updates/or Summary:

The new policy, Provider Manual Policy Chapter 54, Group Home Requirements, was developed to:

- Detail requirements applicable to all Group Home types.
- Provide additional requirements for Enhanced Behavioral Group Homes, Emergency Receiving Homes, and Nursing Supported Group Homes.

Division of Developmental Disabilities
**Provider Manual Revision
History**

Date: May 24, 2023

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

Revised Policies:

Chapter 37 – Therapy Services (Occupational, Physical, and Speech-Language)

Updates/or Summary:

- Adds and updates definitions relevant to the policy.
- Updates and clarifies Qualified Vendor requirements for establishment, delivery, and discharge of therapy services.
- Adds Third Party Liability requirements.
- Updates the document to align with DDD's policy formatting standards.

Division of Developmental Disabilities

Provider 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.

New Policy:

Chapter 70 – Qualified Vendor Incident Reporting

Updates/or Summary:

- This is a new provider policy regarding incident reporting and includes the incorporation of recommendations received during the Public Comment phase.

Revised Policies:

Chapter 46 – Agency With Choice

Updates/or Summary:

- Adds definitions relevant to the policy.
- Clarifies Qualifies Vendor requirements for opting in as an Agency With Choice Vendor.
- Updates the document to align with DDD's policy formatting standards.

Chapter 50 – Vendor Call Requirements for Qualified Vendors

Updates/or Summary:

- Adds definitions relevant to the policy.
- Clarifies requirements for emergency vendor calls.
- Updates vendor selection requirements.
- Updates the document to align with DDD's policy formatting standards.

Division of Developmental Disabilities Provider 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.

Revised Policies:

Chapter 2 – Provider Expectations and Responsibilities

Updates/or Summary:

- Updates the policy to align with the CMS HCBS Final Rule
- Adds the purpose statement for clarity.
- Adds relevant definitions to the policy.
- Updates the document to align with the DDD's current policy formatting standards.

Chapter 12 – Billing and Claim Submission

Updates/or Summary:

- Includes additional definitions.
- References the WellSky claims system for claims submissions requirements.
- Clarifies requirements for reimbursement of covered services provided to AHCCCS members.
- Clarifies requirements for overpayments and claims adjustments.
- Updates the documents to align with DDD's policy formatting standards.
- Removes informational statements for clarity and conciseness.

Division of Developmental Disabilities
**Provider Manual Revision
History**

Date: March 29, 2023

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

Revised Policies:

Chapter 11 – ALTCS Inquiries, Grievances, Claim Disputes, and Appeals

Updates/or Summary:

- The timeline for requesting State Fair Hearing to appeal an Administrative Review decision has been updated to reflect the current federal standard of 120 calendar days.

Division of Developmental Disabilities Provider Manual Revision History

Date: March 22, 2023

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

Revised Policies:

Chapter 27 – Peer Review and Inter-Rater Reliability

Updates/or Summary:

- Provider policy has been separated from provider information.
- Information was added to clarify that the Division has all Peer Review Committee members sign confidentiality statements and keep those confidentiality statements on file.
- Formatting and style were updated to align with Division standards.

Chapter 42 – Electronic Monitoring in Program Sites

Updates/or Summary:

- This policy expands on the requirements for Day Programs and Employment Services in regards to electronic monitoring devices as well as establishes policy for electronic monitoring devices in Service Provider operated DDD Group Homes and DDD Nursing Supported Group Homes.

Chapter 64 – Preventing Member Abuse, Neglect and Exploitation

Updates/or Summary:

- A general definition of "abuse" was added to align with the AHCCCS Contract and Policy Dictionary.
- The definition for "Abuse (of a member)" was removed.
- A Definition for "Member" was added.
- Formatting and style were updated to align with Division standards.

Division of Developmental Disabilities Provider 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.

Revised Policy:

Chapter 43 – Workforce Development

Updates/or Summary:

- Clarified the Purpose statement
- Added new definitions and removed the outdated definitions.
- Revised "General" section
- Changed the title of "Workforce Development Plan and Progress Report" section to "Network Workforce Development Plan" and revised the language.
- Revised "Monitor Workforce Development Activities" and "Workforce Data" sections.

Division of Developmental Disabilities
**Provider 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 Policy:

Chapter 3 – Provider Customer Service and Network Support

Updates/or Summary:

- Modifies the purpose statement for clarity.
- Removes unnecessary definitions.
- Updates information on the assistance offered by the DDD Customer Service Center and DDD Provider Network Support.
- Adds contact information for the DDD Network Development and Recruitment Unit and the support provided.
- Updates the document to align with DDD's current formatting standards.

Division of Developmental Disabilities
**Provider 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.

New Policy:

Chapter 53 – Respite Provided at Camp to Division Members

Updates/or Summary:

- This is a new policy developed to support children in the care of DCS in community residential settings, including providing access to community residential settings to children likely eligible for DDD and their siblings.

Division of Developmental Disabilities

Provider 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.

Revised Policies:

Chapter 43 – Respite Provided at Camp to Division Members

Updates/or Summary:

- Changed the title of the policy to "Respite Provided at Camp to Division Members."
- Updated the purpose of the policy
- Added the definition of "Community Setting."
- Updated provisions regarding the utilization of respite for camp, program site requirements for camp, and camp related activity fees.
- Removed "Number of Units of Respite for Camp" section.
- Modified language throughout the policy for clarity.
- Updated formatting to conform with Policy Unit Standards.

Division of Developmental Disabilities
**Provider 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.

Revised Policies:

Chapter 2 – Provider Responsibilities and Expectations

Updates/or Summary:

- The phrase “continuous care more than 16 hours per day” was replaced with “care for more than 16 hours in a 24 hour period.”
- Links to websites were removed.

Division of Developmental Disabilities Provider Manual Revision History

Date: September 28, 2022

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

Revised Policies:

Chapter 51 – Oversight and Monitoring of Developmental Home Services

Updates/or Summary:

- Division responsibilities were clarified.
- Qualified Vendor responsibilities were clarified.
- The word **placement** was replaced with the word **move**.
- A list of documents needed for the licensing file was added.
- A list of documentation needed when documenting visits in Quick Connect was added.
- A renewal application and home study may be submitted for a license applicant whose license has been voluntarily closed or expired for **less than six months** was changed to **less than one year**.

Division of Developmental Disabilities
**Provider Manual Revision
History**

Date: September 21, 2022

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

Revised Policies:

Chapter 64 – Preventing Abuse, Neglect, and Exploitation

Updates/or Summary:

- Definition of abuse has been updated to include "emotional abuse."

Chapter 44 – Qualified Vendor Responsibilities for Planning Meetings

Updates/or Summary:

- This policy has been retired and the information can now be found in Provider Manual Chapter 2

Division of Developmental Disabilities
**Provider Manual Revision
History**

Date: September 7, 2022

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

Revised Policies:

Chapter 57 – Third Party Liability Waiver Requests

Updates/or Summary:

- Aligns with the implementation of the WellSky claims system by removing references to FOCUS.
- Removes informational statements and retains the providers' Third Party Liability responsibilities for clarity and conciseness.
- Updates the document to align with the DDD's policy formatting standards.

Division of Developmental Disabilities

Provider Manual Revision

History

Date: August 10, 2022

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

Revised Policies:

Chapter 52 – Habilitation Staffing Schedule Requirements and Annual Review

Updates/or Summary:

- Title change (fka Daily Habilitation Staffing Schedule – Group Home and Individually Designed Living Arrangements)
- Language expanding Vendor responsibilities and expectations regarding preparation and submission of staffing schedules
- Language added regarding the Residential Assessment Profile (RAP) tool
- Additional details and clarification regarding Master and Temporary Schedules, and modifications
- Terminology updates and sentences structuring for clarity

Division of Developmental Disabilities Provider 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.

Revised Policies:

Chapter 27 – Inter-Rater Reliability (IRR) and Peer Review

Updates/or Summary:

- Reformats to comport with new template
- Explains that the Division has an IRR process in place to ensure that medical necessity decisions are made consistently by staff and that staff are tested periodically.
- Explains that peer review process is used to evaluate the necessity, quality of care, and use of services provided by health care providers.
- Explains how a case may be subjected to peer review
- Explains that providers are informed of the results of peer review and that a dispute mechanism is available for the provider to challenge any findings or recommendations that result in an adverse impact to the provider.

Chapter 48 – Credentialing of Contracted Providers

Updates/or Summary:

- Reformats to comport with new template
- Adds cross references to Division policy 950
- Adds language that a vendor is notified within 10 days of the date the Credentialing Committee issues the approval
- Clarifies that either a credible allegation or determination of fraud, abuse, or waste is sufficient to support a credentialing adverse action (deny, suspend, terminate) in accordance with federal law.

Division of Developmental Disabilities

Provider 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.

Revised Policies:

Chapter 2 – Provider Responsibilities and Expectations

Updates/or Summary:

- Updated definitions
- Updated description of the criteria for member health information disclosure
- Updated limitations on how many hours an individual provider can provide care
- Updated Medical Record Standards
- Updated PCSP
- Updated Code of Conduct

Chapter 37 – Therapy Services (Occupational, Physical, and Speech-Language)

Updates/or Summary:

- The scope of the Policy has been expanded to include more detail about how therapy services are delivered
- The name of the Policy has been changed from "Family and Caregiver Participation in Therapy Sessions" to reflect the scope change
- A section has been added to identify what therapy services and details of how missed and make up sessions are handled has been added
- Details about obtaining Prior Authorization have been added
- The existing Policy was expanded to include more information about family/caregiver participation in therapy services
- Early and periodic screening, diagnostic and treatment services have been added
- Details about discharge criteria have been added

Division of Developmental Disabilities

Provider Manual Revision

History

Date: June 24, 2022

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

New/Revised Policies:

Chapter 7 – Dental/Oral Health Care

Updates/or Summary:

- Changed the title to Dental/Oral Health Care
- Updated the references
- Added the purpose of the policy
- Added the definitions section and defined relevant terms in the policy

Chapter 59 – Benefit Coordination and Fiscal Responsibility for Behavioral Health Services and Physical Health Services

Updates/or Summary:

- Updated the references
- Updated definitions section
- Clarified that the payment for Division covered behavioral health and physical health services is determined by the Principle Diagnosis appearing on a claim.
- Added Specific Circumstances for Payment Responsibilities section.
- Included the provisions of Behavioral and Physical Health Responsibilities section into the policy and deleted the section.

Chapter 65 – Requirements for Qualified Vendors and Providers on Providing Medicaid Services Outside the State and Country

Updates/or Summary:

- Changed the title of the policy to Requirements for Qualified Vendors and Providers on Providing Medicaid Services Outside the State
- Updated the references
- Added the purpose of the polic.
- Added the definitions section and defined relevant terms in the policy
- Added requirements for vendors/providers for delivering services to a Division member who is out of state.
- Added requirements for vendor/providers to provide reports
- Added Vendor Requirements for Specific HCBS Services section

- Removed irrelevant provisions from the existing policy.

Chapter 66 – Behavioral Health

Updates/or Summary:

- Provider 66 is a new chapter for the DDD Provider Manual, which provides a high-level overview of existing policies.

Division of Developmental Disabilities

Provider Manual Revision

History

Date: June 15, 2022

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

Revised Policies:

Chapter 4 – Prior Authorization Requirements

Updates/or Summary:

- Updated definitions
- Updated ALTCS title XIX to Medicaid

Chapter 6 – Early and Periodic Screening, Diagnostic and Treatment Services

Updates/or Summary:

- Updated definitions
- Additional information pertaining to Provider requirements has been added to better align with the Division's AdSS Medical Manual.

Chapter 11 – ALTCS Inquiries, Grievances, Claim Disputes and Appeals

Updates/or Summary:

- Added the purpose of the policy
- Added Definitions section and defined "Member Grievance," "Member Inquiry," "Provider Grievance," and "Provider Inquiry."
- Added "Members Inquiries," "Member Grievances," "Provider Inquiries," and "Provider Grievances" sections.
- Removed "Grievances" section
- Updated "Provider Claim Disputes," "State Fair Hearing (Regarding Notice of Decision)," "Appeals," and "State Fair Hearings (Regarding Notice of Appeal Resolution)" sections.

Chapter 18 – Claims Medical Review

Updates/or Summary:

- Removed existing language of the policy
- Added the purpose of the policy
- Added Definitions section and defined terms used in the policy
- Added "Medical Review," "Medical Review Process," "Requirements," "Denials," "Claim

Submission and Provider Enrollment," "Reconciling Paid Claims," and "Time Frame for Initial Billing Submission and Resubmissions."

Chapter 31 – Transitioning Members Between DDD Health Plans

Updates/or Summary:

- Updated title to Transitioning Members Between DDD Health Plans from Chang of Contractor
- Added DDD member services contact information for contractor change request
- Removed prelude

Chapter 68 – Advance Directives

Updates/or Summary:

- Describes the purpose of the policy
- Defines "Adult Member," "Advance Directive," and "Conscientious Objections."
- Sets forth the Division's policy regarding member's right to have information regarding Advance Directives.

Chapter 69 – Care Coordination

Updates/or Summary:

- Provider Manual Chapter 69 is a new policy that provides information to DDD providers about care coordination for DDD members. This includes information about DDD's care management program and care coordination with other government agencies.

Division of Developmental Disabilities
**Provider 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 Policies:

Appendix C – Medicaid Encounter Data Verification

Updates/or Summary:

- This appendix has been added to provide DDD and its Providers with the methodology and statistical formulae used in Encounter Data Validation. DDD is required to submit encounters to AHCCCS for all services.

Division of Developmental Disabilities Provider 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.

Revised Policies:

Chapter 67 – General and Informed Consent

Updates/or Summary:

- This policy has been developed to outline the requirements for reviewing and obtaining General and Informed Consent for members receiving physical and/or behavioral health services, as well as consent for any behavioral health survey or evaluation in connection with an AHCCCS school-based prevention program.

Division of Developmental Disabilities
**Provider 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.

Revised Policies:

Chapter 17 – Prior Authorization Requirements

Updates/or Summary:

- This policy has been revised to include the Tribal Health Program transitioning to AHCCCS as well as updated AdSS health plan contact information.

Chapter 22 – Pharmacy Services

Updates/or Summary:

- This policy has been revised to explain how pharmacy services are administered by the Division and the subcontracted health plans.

Division of Developmental Disabilities
**Provider Policy Manual Revision
History**

Date: March 30, 2022

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

Revised/New Policy:

Chapter 30 Clinical Practice Guidelines

Updates/or Summary:

- Outdated webpage links were removed from the policy.
- Grammar and sentence structure were updated to clarify policy.

Division of Developmental Disabilities

Provider Manual Policy 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:

Chapter 20 Fraud, Waste and Abuse

Updates/or Summary:

- The purpose section was updated
- The Fraud Contact section was added which includes the various ways fraud, waste, and abuse can be reported by providers.

Division of Developmental Disabilities
**Provider Manual Policy Revision
History**

Date: March 2, 2022

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

Revised/New Policy:

Chapter 50 Vendor Call Requirements for Qualified Vendors

Updates/or Summary:

- Purpose Section Updated
- Definition added for Residential Services.
- Expansion – Group Homes and Nursing Supported Group Homes subsection added to the Residential Services Section.
- The following language added to the subsection Request for Release from Service Authorization – Residential Services

“The Qualified Vendor shall continue to provide service until a new Qualified Vendor is authorized.”
- The term *residential placement* has been changed to *residential services* throughout the policy, where applicable.

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

Date: January 19, 2022

Revision Effective Date: January 19, 2022

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/New Policy:

Chapter 1 – Introduction to the Division of Developmental Disabilities

The Division of Developmental Disabilities (DDD, the Division) within the Arizona Department of Economic Security provides services and supports to people with intellectual and developmental disabilities and their families. This policy applies to Qualified Vendors and Independent Providers contracted with the Division of Developmental Disabilities (DDD, the Division). The purpose of this policy is to provide an introduction to the Division of Developmental Disabilities and the scope of services provided.

Updates/or Summary:

- Purpose section added
- Definitions section added
- Removed the organizational chart and added a link to the organizational chart
- Updated name from *American Indian Health Plan (AIHP)* to *Tribal Health Plan (THP)*
- Added sections to outline the scope: Support Coordination, State Operated Services, Quality Management, and Network Operations, Management, and Licensing
- Expanded and clarified language in sections: Home and Community-Based Services and Physical and Behavioral Health Services

Division of Developmental Disabilities

Provider Policy Manual

Revision History

Date: November 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 POLICIES

Chapter 49, Responsible Driving

This is a revised policy that applies to the Qualified Vendors for the DDD. This policy has been updated as part of the Annual Review to reflect the current practice of the Division.

Changes include:

- The Division encourages providers to use the Policy Development Tool: Transportation (DDD-2051A) to self-assess policies and procedures in advance of the Division's review.
- Qualified Vendors should share Responsible Driving Safety Information Fact Sheet #6 (DDD-1751AFLYPD) with providers.

Chapter 60, Notification to Qualified Vendors

This is a revised policy that applies to the Qualified Vendors for the DDD. This policy has been revised to outline processes used to distribute information to the Divisions Qualified Vendors Network.

Changes to provider network may include but are not limited to:

- A change that would cause or is likely to cause more than 5% of the members in a GSA to change the location where services are received or rendered.
- A change impacting 5% or less of the membership but involves a provider or provider group who is the sole provider of a service in a service area or operates in an area with limited alternate sources of the service.
- Revisions made to improve the clarity of the policy including notification of Qualified Vendors in advance of all proposed new policies and major policy changes.

Division of Developmental Disabilities

Provider 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.

RETIRED POLICY

Chapter 45 After Hours Telephone Survey

Description This requirement is now outlined in Provider Manual Chapter 62 Electronic Visit Verification

Division of Developmental Disabilities

Provider 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

- Chapter 1 - Introduction to the Division of Developmental Disabilities
- Chapter 9 - PCP Assignments
- Chapter 10 - Referrals to Specialists
- Chapter 12 - Billing and Claim Submission
- Chapter 13 - Utilization Management
- Chapter 17 - Prior Authorization Requirements
- Chapter 59 - Benefit Coordination and Fiscal Responsibility for BH Svc and PH Svc

Division of Developmental Disabilities

Provider Policy Manual

Revision History

Date: September 22, 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

Chapter 26, Cultural Competency and Member and Family Centered Care

Description:

This is a revised policy that applies to Members and Qualified Vendors for the Division of Developmental Disabilities. This policy has been revised to improve the Division's culture of respect and dignity when supporting individuals who have developmental disabilities. The revision also better aligns the policy with any contractual obligations as well as the Civil Rights Act of 1964 Public Law § 88-352.

Details:

- The title of the policy has been changed from, "Cultural Competency," to, "Cultural Competency and Member and Family Centered Care."
- Additional definitions that outline appropriate disability etiquette and people-first language.
- Establishes an effective communication strategy for Qualified Vendors to reasonable steps to ensure access to services for individuals with developmental disabilities.

Chapter 60, Notifications to Qualified Vendors

Description:

This is a revised policy that applies to Qualified Vendors for the Division of Developmental Disabilities. This policy outline processes used to distribute information to the Division's Qualified Vendor Network.

Details:

- Includes Information regarding the process Qualified Vendors must use to notify the Division (DDD) with their current demographic information, including address, phone number, email address, etc.

NEW POLICY**Chapter 62, Electronic Visit Verification****Description:**

This Policy applies to DES DDD Qualified Vendors and establishes 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. 1396(b)(l).

Details

- Definitions section, and policy regarding:
- Service Verification
- Paper Timesheets
- Electronic Visit Verification Modalities
- Contingency/Back-Up Plan
- Reporting
- Qualified Vendor Requirements
- Qualified Vendor Attestation
- After-Hours Telephone Survey

Division of Developmental Disabilities

Provider 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

12, Billing and Claim Submission

Reason For Changes:

DDD transition to the national standard claims processing system.

Description:

This policy outlines the requirements of the Division of Developmental Disabilities (the Division or DDD) Long Term Care (LTC) / Home and Community Based Services (HCBS) claims submissions process and the American Indian Health Plan (AIHP) Fee for Service (FFS) claims submissions process.

Details:

- Clarified the purpose of the policy.
- Added definitions of Home and Community Based Services (HCBS) and Arizona Long Term Care System (ALTCS) and clarified the existing definitions.
- Updated "Policy" section.
- Updated "Acceptable Claim Forms" section.
- Added "Pharmacy Claims" section to outline Pharmacy Point of Sale (POS) transaction process.
- Clarified language regarding claim submission requirements for paper claims.
- Updated replacements and voids process.
- Updated general division billing rules and additional billing rules processes.
- Clarified language for documentation requirements.
- Changed the heading of "Claim Submission and Provider Registration" section to "Claim Submission and Provider Enrollment" and updated language.
- Made general grammatical and sentence structure updates and revisions for clarity and consistency purposes.
- Updated formatting to conform with Policy Unit standards.

Division of Developmental Disabilities

Provider Policy Manual

Revision History

Date: August 5, 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.

Note: This policy had been posted with these revisions on 7/28/2021. The Policy Team determined that the policy should be posted for public comment first, to solicit feedback from a larger audience. The most recent version of Chapter 26 (revised on 6/10/2016) was restored from back-ups.

This policy will be available for Public Comment on the DDD website from August 5, 2021 through September 7, 2021. Please visit the link below to review and submit your feedback:

<https://des.az.gov/services/disabilities/developmental-disabilities/policies-and-rules>

REVISED POLICY

Chapter 26, Cultural Competency and Member and Family Centered Care

This is a revised policy that applies to Members and Qualified Vendors for the Division of Developmental Disabilities. This policy has been revised to improve the Division's culture of respect and dignity when supporting individuals who have developmental disabilities. The revision also better aligns the policy with any conceptual obligations as well as the Civil Rights Act of 1964 Public Law § 88-352.

Changes were made to better align Division policy with contractual obligations and Federal law as well as to provide guidance to Qualified Vendors on developing a communication strategy to ensure access to services for individuals with developmental disabilities.

Revisions include:

- Additional definitions that outline appropriate disability etiquette and people-first language.
- Establishes an effective communication strategy for Qualified Vendors to reasonable steps to ensure access to services for individuals with developmental disabilities.
- The title of the policy has been changed from, "Cultural Competency," to, "Cultural Competency and Member and Family Centered Care."

Division of Developmental Disabilities

Provider Policy Manual

Revision History

Date: July 28, 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

Chapter 26, Cultural Competency and Member and Family Centered Care

This is a revised policy that applies to Members and Qualified Vendors for the Division of Developmental Disabilities. This policy has been revised to improve the Division's culture of respect and dignity when supporting individuals who have developmental disabilities. The revision also better aligns the policy with any conceptual obligations as well as the Civil Rights Act of 1964 Public Law § 88-352.

Changes were made to better align Division policy with contractual obligations and Federal law as well as to provide guidance to Qualified Vendors on developing a communication strategy to ensure access to services for individuals with developmental disabilities.

Revisions include:

- Additional definitions that outline appropriate disability etiquette and people-first language.
- Establishes an effective communication strategy for Qualified Vendors to reasonable steps to ensure access to services for individuals with developmental disabilities.
- The title of the policy has been changed from, "Cultural Competency," to, "Cultural Competency and Member and Family Centered Care."

Division of Developmental Disabilities

Provider 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.

REVISED POLICY

Chapter 64, Preventing Member Abuse, Neglect, and Exploitation

This policy has been revised in consideration of public comments received during the solicitation of public comments. The policy is intended for Qualified Vendors who provide Day Treatment and Residential Services to DDD members.

The purpose of the policy is to outline the required training for vendor staff to ensure they are fully trained in recognizing and reporting abuse, neglect, and exploitation of our most vulnerable members; required training, and required signage to be posted for members, families, visitors, and staff, illustrating how to identify and report abuse, and protections in place against retaliation.

Revisions include:

- Language regarding training requirements for vendor staff and Division members was clarified in order to provide a clear understandable and expectation of the training and its requirements.
- Language regarding posting of signage was clarified in order to provide a clear understanding and expectation of signage posting and location.
- General formatting and sentence structuring updates for clarity and ease of reading.

Division of Developmental Disabilities
Provider Policy Notification

Date: June 2, 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

47, Managing Vendor Call Lists, Vendor Directories, Scope of Services and Reporting Requirements

Revisions include: Changes in residential capacity of group homes in specific geographical areas/Districts; standardized practice; "Provider Directories" was changed to "Vendor Directories" in the title of the policy; terminology updates; minor grammatical and sentence structuring.

Division of Developmental Disabilities
Provider 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

59, Benefit Coordination and Fiscal Responsibility for Behavioral Health Services and Physical Health

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

Division of Developmental Disabilities

Provider Policy Notification

Date: March 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

Chapter 50, Vendor Call Requirements for Qualified Vendors

This policy has undergone substantial revisions due to the recent implementation of the new statewide non-residential vendor call process. The revisions reflect improvements to the vendor call process to ensure members receive services in a timely manner and modifications within Focus to reduce duplicative work for both Qualified Vendors and Division Staff. All staff involved in the non-residential vendor call process should review this policy.

No changes were made to the residential vendor call process.

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

Provider 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 65 – Requirements for Qualified Vendors and Providers on Providing Medicaid Services Outside the State and Country

This is a new policy that provides guidance to qualified vendors/providers when providing Medicaid services when a member temporarily leaves the state or country.

Updates/or Summary:

- Outlines temporary leave for less than 30 days
- Outlines temporary leave for more than 30 days
- Outlines Requests for Paid Services
- Outlines temporarily leaving the country

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

Provider Policy Manual Notification

Date: February 24, 2021

Revision Effective Date: February 24, 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 34 – Provider Publication

This policy outlines the responsibilities of the Qualified Vendor and the Division regarding the review all reports or publications (written, visual, and/or audio communications) which are intended for Division members or applicants for services funded or partially funded by the Division. The update clarifies the requirement to comply with laws and regulations regarding individual rights, and Protected Health Information (PHI), in these publications.

Updates/or Summary:

- Added the following sentence to the introductory paragraph:
In all provider publications, including website content, the Qualified Vendor is responsible for complying with any applicable laws and regulations regarding individual rights and Protected Health Information.

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

Provider Policy Manual Notification

Date: February 24, 2021

Revision Effective Date: February 24, 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 51 – Oversight and Monitoring of Developmental Home Services

This policy outlines the roles, responsibilities, and requirements of the Division of Developmental Disabilities (Division), Qualified Vendors, and licensees in the provision of Developmental Home services and Child Developmental Certified Home services. Revisions have been made to align with current procedures.

Updates/or Summary:

- Changed life-safety inspection requirement from every three years to annually.
- Updated training requirements.
- Updated Home Study, Home Visits, and Technical Assistance section.
- Updated Developmental Home Census and Reporting Changes section.
- Added section on Child Developmental Certified Homes.
- Added section on Records.
- Added section on Renewing the Certification.
- Added section on Terminating a Certification.
- Updated general formatting, sentence structuring, and terminology.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Provider Policy Manual Notification

Approval Date: 1/27/2021

Revision Effective Date: 1/27/2021

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.

Obsoleted/Retired Policy:

62, QUALIFIED VENDOR MANAGEMENT OF GAPS IN CRITICAL SERVICES

Policy Description:

This policy applies to Qualified Vendors (QVs) of the Division of Developmental Disabilities (Division). This policy establishes requirements and timeframes for responding to, and reporting, gaps in critical services to Arizona Long Term Care (ALTCS) members receiving:

- Home and Community Based (HCBS) services (Attendant Care [ATC], Homemaker/ Housekeeping [HSK] and Respite [RSP])
- Individually Designed Living Arrangement (IDLA) and Nursing services.

Details for removal of Policy:

For many years, qualified vendors have been required to report gaps in critical services to the Division as outlined in the Division's Provider Manual Chapter 62. Effective January 1, 2021, Qualified Vendors who provide Attendant Care (ATC), Homemaker (HSK), Respite (RSP), Individually Designed Living Arrangement (IDLA) and in-home Nursing services will no longer be required to submit the monthly Gap in Critical Services Logs to the Division because of Arizona's implementation of Electronic Visit Verification (EVV). The Division will be rescinding this Chapter. Although the requirement to report the Gap in Critical Logs to the Division is no longer required, vendors are expected to ensure members continue to receive timely services as scheduled. Gaps in service will be monitored using EVV reporting data. To learn more about EVV, visit azahcccs.gov/evv.

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

Provider Policy Manual Notification

Date: 12/09/2020

Effective Date: To be Announced

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.

Rescind:

Chapter 64 – Abuse, Neglect, and Exploitation Prevention

Policy Description: This policy establishes requirements for Qualified Vendors (Vendors) and the Division of Developmental Disabilities (the Division) the prevention of abuse, neglect, and exploitation of Division Member's.

Reason for Rescinding: The Division has received additional public comment vital to the policy and will rescind for further review. The policy will re-post in the near future.

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

Provider Policy Manual Notification

Date: 11/12/2020

Effective Date: 11/12/2020

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.

New Policy:

Chapter 64 – Abuse, Neglect, and Exploitation Prevention

Reason for changes: *As part of the Governor's Executive Order*

Impact to members: *No impact to member activities*

Impact to providers: *Ensures that the Qualified Vendors and the Division meet their contract obligations.*

Policy Description: This policy establishes requirements for Qualified Vendors (Vendors) and the Division of Developmental Disabilities (the Division) the prevention of abuse, neglect, and exploitation of Division Member's.

New Policy:

- The Division created a new policy to align with the *AHCCCS Minimum Subcontract Provisions Number 29*.
 - Outlines the requirements for:
 - The posting of signage
 - Training aimed at preventing abuse, neglect, and exploitation
-

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Provider Policy Manual Notification

Approval Date: 11/04/2020

Revision Effective Date: 11/04/2020

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:

Chapter 61, Home and Community Based Services (HCBS) Certification and Provider Enrollment

Details:

- Changed the title of the policy from "Home and Community Based Services (HCBS) Certification and Provider Registration" to "Home and Community Based Services (HCBS) Certification and Provider Enrollment."
- Clarified language in the application process in HCBS Certification for Independent Providers section and updated application packet list.
- Clarified language in the application process in HCBS Certification for Qualified Vendors section and updated application packet list.
- Clarified language in the application process in HCBS Certification for Specialty Contract/AZEIP Providers section packet list.
- Clarified language in the AHCCCS Enrollment section.
- Clarified language in the AHCCCS Mandates Section.

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

Provider Policy Manual Notification

Date: July 1, 2020

Revision Effective Date: July 1, 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.

Chapter 3 – Provider Service Departments

This is a revised policy that applies to Qualified Vendors for the Division of Developmental Disabilities. This policy establishes the responsibilities of the Customer Service Department.

Revised Policy:

- Removing an obsolete phone number 602-542-0419.
- Correcting provider customer service email.
- Adding the Customer Service 24 hours response time.

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

Provider Policy Manual Notification

Date: July 1, 2020

Revision Effective Date: July 1, 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.

Chapter 22 – Formulary Information

This is a revised policy that provides members and providers with the formulary and/or Preferred Drug List (PDL) for the Division's preferred health plans. This policy provides current web addresses to these online resources.

Revised Policy:

- Updated with the current web addresses of the subcontracted health plans' formularies.
- Updated with the web address for Optum.
- Updates with the current web address to AHCCCS pharmacy updates.

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

Provider Policy Manual Notification

Date: July 1, 2020

Revision Effective Date: July 1, 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.

Chapter 58 – Medication Management Services

This is a revised policy that provides members and providers with information on the Division's guidelines for the Primary Care Providers' (PSPs') ability to treat behavioral health conditions within their scope of practice.

Revised Policy:

- Updated the first paragraph to align more closely with the AHCCCS-DDD contract.
- Added the details on Medication Assisted Treatment.
- Added the details on Step Therapy.
- Added the details on Tool Kits.

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

Provider 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

35, Progress Reporting Requirement

Policy Description: The policy describes the progress reports and other documentation which must be developed and maintained by the vendor based on the service(s) being provided.

Revisions: *Clarifies the document requirements needed to obtain the initial request, and future evaluation(s), for Therapy Services – includes the Initial Evaluation, Plan of Care, Reevaluation and Plan of Care Recertification, and Progress Reporting.*

- The minimum required elements to include in a progress report;
 - The requirement to develop a Plan of Care as part of the therapy process and the timing;
 - The need to submit quarterly progress reports, with a list of team members/roles who should see them;
 - The need to complete treatment of a skilled service encounter and obtain the provider signature at the end of every treatment;
 - And expands the list of considerations for types of member difficulties within the Home/School/Work setting.
-

Please send any questions to DDDPolicy@azdes.gov.
Division of Developmental Disabilities
Provider 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:

2 Provider Responsibilities and Expectations

- This policy was revised to include language about using phone or WebEx technology for planning meetings.

10 Referrals to Specialists

- The behavioral health section of this policy was revised to reflect 10/1/19 integration. The phone number for DDD Customer Service was updated to the toll free number, 844-770-9500.

20 Fraud Waste and Abuse

- This policy was revised to include policy objectives. Definitions and examples of fraud were added. A new section on Prevention and Detection was added. Specific topics for provider training and education requirements were added. The contact information of DDD Corporate Compliance Unit was updated along with a link to the online referral form.

21 False Claims Act

- This policy was revised to include policy overview, objectives, and definitions. A section on the False Claims Act and a section on Training for providers were added.

Please send any questions to DDDPolicy@azdes.gov.
Division of Developmental Disabilities
Provider 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:

12. Billing and Claim Submission

Policy Description: This policy contains general information related to the Division of Developmental Disabilities (the Division) claims submission by Providers.

Revision:

- Changing title from "Billing and Encounter Submission" to "Billing and Claim Submission."
 - Clarifying the Division and Provider responsibilities for claims submission and billing.
 - Updated formatting corresponding with Policy Unit standards.
 - Updated policy to correspond with AHCCCS recoupment requirements.
 - Delineates the claims submission frequency and requirements for providers.
-

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

Provider Policy Manual Notification

Date: 08/28/2019

Revision Effective Date: 08/28/2019

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:

11, ALTCS Grievances, Claim Disputes, and Appeals

Revisions:

- Update to the address – their office location has changed to:

Division of Developmental Disabilities
Office of Administrative Review
4000 North Central Avenue, 3rd Floor, Suite 301
Mail Drop 2HE5
Phoenix, Arizona 85012

602-771-8163 or 1-855-888-3106

All phone and fax numbers are the same. Please call the OAR main number at (602) 771-8163, with any questions.

- Update to the title:
Office of Compliance and Review has changed to:
Office of Administrative Review (OAR)
-

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

Provider Policy Manual Notification

Date: 08/21/2019

Revision Effective Date: 08/21/2019

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:

47, Managing Vendor Call Lists, Provider Directories, Scope of Services and Reporting Requirements

Reason for changes: To add "cultural and linguistic capabilities and special accessibility features" language.

Impact to members: No impact.

Impact to providers: No impact.

Policy Description: Outlines the process used by a Qualified Vendor to amend or make changes to the Qualified Vendor Agreement; staff requirements to update Provider Directories and Vendor Call Lists.

Revisions:

- Title change from Maintenance of Vendor Call Lists, Provider Directories, and Reporting Diminishing Scope of Services to Managing Vendor Call Lists, Provider Directories, Scope of Services and Reporting Requirements.
- Added language, "... the cultural and linguistic capabilities and special accessibility features," to reflect information contained in form DDD 1821A.
- General grammatical/sentence structure updates and revisions for clarity and consistency purposes.

61, HCBS Certification and Provider Registration

Reason for changes: Some changes were related to the 10/1/2019 implementation of the DDD Health Plan initiative. The changes to the roster will increase accountability for agencies to maintain worker compliance standards.

Impact to members: *With the increased accountability related to the roster, we hope to increase systemic compliancy around worker qualification requirements. There will be no immediate felt impact for members.*

Impact to providers: Agencies completing HCBS certification through the OLCR tracking application are required to update the staff roster every 30 days. The policy provides guidance for agencies contracted with an MCO and agencies with a specialty contract.

Policy Description: The policy provides guidance for HCBS agencies that are contracted with a Managed Care Organization. For Qualified Vendors using the Focus application, the policy clarifies that the Focus-based roster must be updated at 30-day intervals. The policy also contains new content addressing HCBS certification for specialty contractors.

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

Date: July 31, 2019

Revision Effective Date: July 31, 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:

16, Remittance Advice, Eligibility, and Cost Sharing

Reason for changes: Aligning with AHCCCS requirements

Impact to members: No impact to member activities

Impact to providers: Ensures that the Division meet their contract obligations.

Policy Description: This policy contains general information related to the Division of Developmental Disabilities (the Division) remittance advice, eligibility, and cost sharing.

Revisions:

- Changed title from "Remittance Advice, Reimbursement, and Cost Sharing" to "Remittance Advice, Eligibility, and Cost Sharing."
 - Clarifying the Division and Provider responsibilities for claim replacements.
 - Added eligibility section including Prior Period Coverage requirements
 - Added overpayment protocol and recoupment information
 - Updated formatting corresponding with Policy Unit standards.
 - Updated policy to correspond with AHCCCS recoupment requirements.
-

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

Provider Policy Manual Notification

Date: June 26, 2019

Revision Effective Date: June 26, 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:

35, Progress Reporting Requirement

Updated to clarify the instructions for progress reports.

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

Provider 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.

New Policies:

63, Workforce Development

- This is a new policy that describes Qualified Vendor requirements to implement workforce development initiatives, which include monitoring and collection of information about the workforce, collaborative planning of workforce development initiatives, and participation in Division-directed initiatives.
-

Revised Policies:

30, Clinical Practice Guidelines

- Removed reference to the National Guideline Clearinghouse; provided Division website location of the Division's Clinical Practice Guidelines.
-

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

Provider Policy Manual Notification

Date: April 3, 2019

Revision Effective Date: April 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.

New Policies:

52, Daily Habilitation Staffing Schedule – Group Homes and Individually Designed Living Arrangements

- This policy describes the process for preparing and submitting a Daily Habilitation Staffing Schedule for approval for Group Homes and Individually Designed Living Arrangements (IDLA).

Revised Policies:

46, Agency With Choice

- Revised to correct phone number and replace non-functioning links with functioning links.
-

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

Provider Policy Manual Notification

Date: January 16, 2019

Revision Effective Date: January 16, 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 Policies:

23, Appointment Standards

- Revised to reflect current practice, clarify existing text, and to add standards for behavioral health.

25, Enrollment Verification

- Corrected phone number reference.
-

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

Provider Policy Manual Notification

Date: December 26, 2018

Revision Effective Date: December 26, 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:

51, Oversight and Monitoring of Developmental Home Services

This policy applies to Qualified Vendors for the Division of Developmental Disabilities. This policy was created to define the roles or responsibilities of the Division, define the licensing system, and outline the training requirements for new QV's.

The following changes were made:

- Added "Report Changes" to title.
 - Added a section describing the Division's duties, which include managing Network, maintaining capacity accuracy, and supporting membership.
 - Added a section explaining the bed holds requirements and specifications.
 - Removed unnecessary words.
-

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

Provider 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.

Revised Policies:

59, Benefit Coordination and Fiscal Responsibility for Behavioral Health Services and Physical Health Services

- Policy was revised to include definitions from AHCCCS Operations Policy 432.
-

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

Provider 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:

8, Maternity and Family Planning

- Language regarding covered services was moved to Medical Policy Manual.
 - Added references to Medical Policy Manual 410 Maternity Care Services and 420 Family Planning.
-

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

Provider Policy Manual Notification

Date: August 15, 2018

Revision Effective Date: August 15, 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 Policy:

51 – Oversight and Monitoring of Developmental Home Services

This is a new policy that applies to Qualified Vendors for the Division of Developmental Disabilities. This policy was created to define the roles or responsibilities of the Division, define the licensing system, and outline the training requirements for new QV's.

The policy also includes additional information and changes based on public comments. The following are some of the public comments:

- Changing monitoring visit from 120 to 90 days.
 - Updating language, "Children deemed likely to be eligible for Division services may be placed upon approval by the Division staff."
 - The Home Study and Assessment training referenced in Chapter 51 will be offered with increased frequency.
 - Updating language, "New placement visits must be completed within 7 days of placement and once per week during the first four weeks of placement for licensees providing developmental home services for the first time."
 - Updating language, "The licensee selects a Qualified Vendor based on individual preference; however, licensee may not transfer from one Qualified Vendor to another if the license is within 90 days of expiration."
-

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

Provider Policy Manual Notification

Date: June 27, 2018

Revision Effective Date: June 27, 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 Policies:

16 – Remittance Advice, Reimbursement, and Cost Sharing

- Added reference to AHCCCS Fee-For-Service Provider Manual
-

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

Provider Policy Manual Notification

Date: June 20, 2018

Revision Effective Date: June 20, 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:

61 – Home and Community Based Services (HCBS) Certification and Provider Registration.

Revised policy to:

- State that a fingerprint card must be included in the application packet unless the applicant is exempted per A.R.S. § 36-594.01
 - Clarify that a home inspection (Life Safety Inspection) must be completed by OLCR prior to services being delivered in the setting
 - Provide instructions regarding the requirement that Qualified Vendor Agencies or individuals with a Qualified Vendor Agreement complete the HCBS Certification process online through the Division's Focus application.
 - Include Division physical and email addresses to be used when sending certain information to the Division.
-

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

Provider Policy Manual Notification

Date: May 30, 2018

Revision Effective Date: May 30, 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 Policies:

16, Remittance Advice, Reimbursement, and Cost Sharing

- Added language explaining what remittance advice is and what it consists of.
- Added a section that outlines the Division's cost sharing responsibilities and provides examples.

59, Benefit Coordination and Fiscal Responsibility for Behavioral Health Services and Physical Health Services

- Expanded language to clarify in more detail payment responsibilities and coordination for physical and behavioral health services.
-

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

Provider Policy Manual Notification

Date: May 16, 2018

Revision Effective Date: May 16, 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 Policies:

3, Provider Service Department

- Updated DDD Customer Service Center phone numbers, included details of data collected, and clarified language of provider grievance (complaint)
-

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

Provider Policy Manual Notification

Date: 4/25/18

Revision Effective Date: 4/25/18

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 Policies:

57, A Third Party Liability: Introduction

- Added service code Intensive Care Facilities (ICM). Providers billing with an ICM service must bill the "Other Payors/Third Party Liability (TPL)" first.

57, E Third Party Liability: DES/DDD Waiver Requests

- Added language "certified Medicare provider." Providers must obtain a Medicare B Explanation of Benefits and submit it to the Division with a DES/DDD waiver.

57, FAQ Appendix

- Changed language to "certified Medicare providers." All providers must be certified with Medicare. Providers must obtain a Medicare B Explanation of Benefits and submit it to the Division with a DES/DDD waiver.
-

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

Provider Policy Manual Notification

Date: April 18, 2018

Revision Effective Date: April 18, 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 Policies:

20, Fraud, Waste, and Abuse

- Added an additional means for a provider to report an incident of potential/suspected fraud, waste or abuse to the Division within one business day of becoming aware of an incident; AHCCCS OIG webpage added:
<https://www.azahcccs.gov/Fraud/AboutOIG/>
-

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Provider Policy Manual Notification

Date: March 7, 2018

Revision Effective Date: March 7, 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:

6, Early and Periodic Screening, Diagnosis and Treatment

Policy language was corrected to state "members age 20 years and under" to reflect AHCCCS requirement.

22, Formulary Information

This policy was revised to:

- State that, when the Division receives formulary updates from AHCCCS, they are reviewed and sent to the Division's Pharmacy Benefits Manager for eligible American Indian members. The Division's subcontracted health plans receive formulary updates from AHCCCS and post updates to formulary information on their websites.
 - Update websites that receive pharmacy updates directly from AHCCCS or a list of medication by classification and brand/generic names:
<https://www.azahcccs.gov/PlansProviders/Pharmacy/>
-

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

Provider Policy Manual Notification

Date: February 14, 2018

Revision Effective Date: February 14, 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:

3, Provider Service Department

- Replaced "United Community Plan" with the correct health plan name "UnitedHealthCare Community Plan." Changed "Grievance and inquiry resolution" to "Grievance System and inquiry resolution."

5, Emergency Room Utilization

- Added a section to describe non-emergent services, and the appropriate after hours at non-emergency facilities. The policy provides examples of non-emergency services.
-

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Provider Policy Manual Notification

Date: January 3, 2018

Revision Effective Date: February 5, 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 Policy:

50, Vendor Call Requirements for Qualified Vendors

This policy explains:

- Requirements of the Qualified Vendor in the vendor call process, explaining the process of responding to Vendor Calls, random auto-assignment, direct referral/calls, and Vendor selection.
 - Timeframes during the selection process and a description of the requirements after a vendor has been selected.
 - Requirement that the Qualified Vendor must have designated staff and e-mail address to receive vendor calls.
-

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Provider Policy Manual Notification

Date: December 13, 2017

Revision Effective Date: December 13, 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.

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.

1, Introduction to the Division of Developmental Disabilities

- This policy was revised to replace "Arizona Physicians Independent Physician Association" with "UnitedHealthcare Community Plan" in a list of health plans.
-

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Provider Policy Manual Notification

Date: September 22, 2017

Revision Effective Date: September 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.

New Policy:

Chapter 62, Qualified Vendor Management of Gaps in Critical Services.

This is a new policy that applies to Qualified Vendors (QVs) of the Division of Developmental Disabilities (Division). This policy establishes requirements and timeframes for responding to, and reporting, gaps in critical services to Arizona Long Term Care (ALTCS) members receiving:

- Home and Community Based (HCBS) services (Attendant Care [ATC], Homemaker/Housekeeping [HSK] and Respite [RSP])
- Individually Designed Living Arrangement (IDLA) and Nursing services.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Provider 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:

Chapter 35 – Progress Reporting Requirements

- Standardized of quarterly reporting requirements for Specialized Habilitation Services so that providers report the same way and include the same required types of information to give a clear picture of the child's progress or lack of progress on a quarterly basis.
-

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

Date: July 14, 2017

Revision Effective Date: July 14, 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.

Corrections to Provider Manual

There were no policy changes; corrections to the Provider Manual include:

- Corrected Provider Manual table of contents to include Chapter 61, Home and Community Based Services (HCBS) Certification and Provider Registration.
 - Moved the title of the Preface page from below the effective date to above the revision date on page 1.
 - Deleted misplaced (duplicate) Chapter 59.
-

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

Provider Policy Manual Notification

Date: June 23, 2017

Revision Effective Date: June 23, 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:

CHAPTER 11 ALTCS Grievances, Claim Disputes, and Appeals

In the Grievances section, updated toll free telephone number for the Division of Developmental Disabilities Customer Service Center to reflect current telephone number (1-844-770-9500).

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

Provider Policy Manual Notification

Date: June 9, 2017

Revision Effective Date: June 9, 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:

CHAPTER 4 COVERED AND NON-COVERED SERVICES

The wording in section C "Examples of Covered Behavioral Health Services" was revised to match exactly the wording used in Provider Manual Chapter 10 -Referrals to Specialists. Specifically, the words "and screening" were added to "Evaluation and Assessment" and "screening" was deleted as a separate item. "Rural Substance Abuse Transitional Agency Services" was also deleted from the list because it is considered a provider type, not a service, and it is not included in the corresponding Chapter 10 list.

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

Provider Policy Manual Notification

Date: May 31, 2017

Revision Effective Date: May 31, 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:

CHAPTER 16 REMITTANCE ADVICE, REIMBURSEMENT, AND COST SHARING

Chapter 16 was completely rewritten to satisfy an AHCCCS CAP that requested Chapters 14, 15, and 16 be revised to:

- Address the reimbursement process for qualified vendors.
- Address the reimbursement process for provider for AIHP members.
- Address and describe when members are responsible for cost sharing and the provider's role in cost sharing activities.
- Provide an explanation of the remittance advice.

Chapters 14 and 15 are rescinded with the publication of Chapter 16.

Rescinded Policies

CHAPTER 14 REIMBURSEMENT

Chapter 14 is rescinded, due to inclusion of its content in the revised Chapter 16 (see explanation above).

CHAPTER 15 COST SHARING

Chapter 15 is rescinded, due to inclusion of its content in the revised Chapter 16 (see explanation above).

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Provider Policy Manual Notification

Date: May 26, 2017

Revision Effective Date: May 26, 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:

PREFACE – INTENDED USERS OF THE PROVIDER POLICY MANUAL

- This preface was created to identify the specific contractor audience for each policy in the Provider Policy Manual.

CHAPTER 48 CREDENTIALING OF CONTRACTED PROVIDERS

- This policy was created to explain the Division's process for credentialing Qualified Vendors.

CHAPTER 49. RESPONSIBLE DRIVING

- The information in this new policy was part of Provider Manual Chapter 39, Value-Based Purchasing — Responsible Driving, but it was created as a stand-alone policy due to redefinition of Value-based Purchasing (VBP). The former Chapter 39 will be removed from the website, and the number "39" will be reserved for a new policy pertaining to VBP.
-

Revised Policies:

CHAPTER 1 INTRODUCTION TO THE DIVISION OF DEVELOPMENTAL DISABILITIES

- This policy was revised to update the Division's Central Office organizational chart, delete the non-current Division's Credo and Value Statement, and explain that the Division is responsible for coordinating behavioral health services with Regional Behavioral Health Authority agencies.

CHAPTER 6 EARLY AND PERIODIC SCREENING, DIAGNOSIS AND TREATMENT

- The References section of this policy was revised to specify which AHCCCS manual serves as a reference and to remove Reference section links.

CHAPTER 13 - UTILIZATION MANAGEMENT

- This policy was completely rewritten to state the Division's expectation of providers in regard to members of American Indian Health Plan and to adhere to the requirements of AHCCCS Contractor Operations Manual (ACOM) Policy 416.

CHAPTER 17 - PRIOR AUTHORIZATION REQUIREMENTS

- This policy was completely rewritten to provide a list of services that require prior authorization, update language to person-first standard, and clearly define prior authorization requirements.

CHAPTER 19 - CONCURRENT REVIEW

- This policy was completely rewritten to define "concurrent review," explain what services may warrant concurrent review, and include references to guidelines that may be used as part of the concurrent review process.

CHAPTER 20 – FRAUD, WASTE, AND ABUSE

- This policy was revised to include:
 - Contact information for reporting provider fraud, waste, and abuse; information regarding available training
 - Reference to the webpage of the AHCCCS Office of Inspector General
 - Change from "Department's Audit and Management Services Division" to "Internal Audit Administration"
 - Instruction to refer suspected incidences of fraud, waste and abuse to the Corporate Compliance Unit for review and potential referral to the AHCCCS Office of Inspector General
 - Updated the Corporate Compliance Unit's address.

CHAPTER 21 - FALSE CLAIMS ACT

- This policy was revised to comply with the requirements outlined in the DDD/ AHCCCS contract and ACOM 103 – Fraud, Waste, and Abuse. References to the Whistleblower Protection Act, Deficit Reduction Act, and False Claims Act were added. Requirements were added for any entity that receives or makes at least five million dollars annually, consistent with Public Law 109-171.

Chapter 22 FORMULARY INFORMATION

- This policy was rewritten to include updated links, information regarding communication of updates, updates to information regarding subscription to updates, and links to Administrative Services Subcontractor formularies.

CHAPTER 27 - PEER REVIEW AND INTER-RATER RELIABILITY

- This policy was revised to include an explanation of reasons for implementing peer review, the goals of the peer review process, and the means by which a provider may appeal peer review findings and decisions

CHAPTER 28 - MEMBER RIGHTS

- This policy was revised to identify required rights, update references, and state that Division contractors must ensure compliance with applicable federal and state laws pertaining to member rights.

CHAPTER 29 – ADVISING OR ADVOCATING ON BEHALF OF A CONSUMER

- This policy was revised to delete nonfunctioning link, add references to the References section, change “consumer” to “member” throughout the policy, and provided clarifying language regarding the Division’s responsibility to members pursuant to 42 CFR 438.102.

CHAPTER 31 - CHANGE OF CONTRACTOR

- This policy was revised to update AHCCCS Contractor Operations Manual references, change “AHCCCS Administration” to “the Division,” and reorganize certain information for clarity.

CHAPTER 59 BENEFIT COORDINATION AND FISCAL RESPONSIBILITY FOR BEHAVIORAL HEALTH SERVICES AND PHYSICAL HEALTH SERVICES

- This policy was revised to address information related to payment responsibilities as outlined in AHCCCS Contractor Operation Manual Policy 432, provide information regarding benefit coordination and fiscal responsibility for physical health services.

Rescinded Policy

CHAPTER 39. VALUE-BASED PURCHASING-RESPONSIBLE DRIVING

The information in this rescinded policy pertaining to Responsible Driving is now in Chapter 49. The number “39” will be reserved for a new policy pertaining to VBP.

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

Provider 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:

Chapter 3 Provider Service Departments

- This policy was revised to change "Provider Relations" to "Customer Service Center," detail the services that the Customer Service Center provides, add a 1-800 service number.

Chapter 5 Emergency Room Utilization

- This policy was revised to define emergency services and describe appropriate and non-appropriate use of the emergency room.

Chapter 8 Maternity and Family Planning

- This policy was revised to include a section on maternity services, add long-acting reversible contraceptives," and add ""Members who transition to a new Contractor or become enrolled during their third trimester must be allowed to complete maternity care with their current AHCCCS registered provider, regardless of contractual status, to ensure continuity of care".

Chapter 9 PCP Assignments

- This policy was revised to include Health Plan contact information, Division contact information, information pertaining to Administrative Services Contractors and Fee-for-service. Links in the References section were removed.

Chapter 10 Referrals to Specialists

- This policy was revised to provide a complete description of the processes for providers who need to refer memberst to specialists (including behavioral health), revise explanation regarding access to behavioral health, list available RBHAs or contact information, and provide a method to notify support coordinators of necessary information.
-

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

Provider Policy Manual Notification

Date: Friday, April 28, 2017

Revision Effective Date: April 28, 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:

CHAPTER 45 AFTER-HOURS TELEPHONE SURVEY

- This pPolicy explains Division requirements regarding Provider availability via telephone after normal business hours and the activities to occur when a Provider is not compliant with Division requirements.

CHAPTER 47 MAINTENANCE OF VENDOR CALL LISTS

- This is a new policy that addresses the process by which a Qualified Vendor notifies the Division of Developmental Disabilities (Division) of its desire to amend or make subsequent changes to their scope of service.
-

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

Date: Thursday, November 10, 2016

Revision Effective Date: November 10, 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 Policy

CHAPTER 40 Insurance

- This is a new policy outlining insurance requirements for providers.

Revised Policies:

CHAPTER 7 Dental

- Added section names "Dental Services for Members Age 20 and Younger" and "Dental Services for Members Age 21 and Older."
- For consistency with recently approved Provider Manual Chapter 4 and AHCCCS change of benefit coverage for members aged 21 and over, in section "Dental Services for Members Age 21 and Older," added "*Other dental services, including dentures, are covered for AHCCCS ALTCS members 21 years of age and older. Dental services are limited to a total benefit amount of \$1,000 per member for each 12-month period beginning October 1, 2016 through September 30, 2017.*"
- For consistency with recently approved Provider Manual Chapter 4, added section called "Emergency Dental Care/Extractions for ALTCS Members of All Ages" and the statement, "*Emergency dental care and extractions are covered for all members who are eligible for ALTCS, regardless of age.*"

CHAPTER 11 ALTCS Grievances, Claim Disputes, and Appeals

- This policy was revised to incorporate current contact information, explain the requirements for filing provider claim disputes, provide instructions for requesting State Fair Hearings, and provide greater detail regarding the appeals process.
-

Please send any questions to DDDPolicy@azdes.gov.
Division of Developmental Disabilities
Provider 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:

Provider Manual Chapter 4 – Covered and Non-covered Services

- Under "Covered Services," added "Podiatry" for members under the age of 21 years (for clarification only) and "Dental" and "Podiatry" for members who are 21 years of age or older, due to the addition of their availability to members effective October 1, 2016.
 - Under "Non-Covered Services," deleted "Most dental care" and "Visits to the podiatrist," for members age 21 years and over, because effective October 1, 2016, these services are covered for members age 21 years and over.
-

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities Provider Manual Notification

Date: August 12, 2016

Revision Effective Date: August 12, 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 Policy:

CHAPTER 39 Value-Based Purchasing – Responsible Driving:

Provider Manual Chapter 39 is a new policy that describes the implementation of Value-Based Purchasing initiatives that leverage managed care toward value-based health care systems in order to improve members' experience/health and limit per-capita health care cost to the rate of general inflation.

Revised Policy:

CHAPTER 2 Provider Responsibilities and Expectations:

- Revisions have been made to this policy to incorporate language of HouseBill 2487.
 - Language added, that a Qualified Vendor for the recruitment of Developmental Home providers must inform the applicant of the requirement for licensure under Arizona Administrative Code.
 - The Qualified Vendor may not "counsel out" or dissuade the vendor who wishes to apply for a developmental home license.
 - If the Qualified Vendor cannot work with the applicant, that decision will not be based on race, religion, national origin, sex, sexual orientation, gender identity or similar protected class.
 - The Qualified Vendor must assist any applicant to find an alternative vendor and if no vendor is available, refer the applicant to the Division.
-

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Provider Policy Manual Notification

Date: July 1, 2016

Effective Date: August 5, 2016

Approved Policy Not Yet Effective (APNYE):

This policy, Provider Manual Chapter 57, Third Party Liability is posted on the Division's website as an [Approved Policy Not Yet Effective](#). This policy will be posted as an *effective* policy on or after August 5, 2016 unless otherwise notified.

CHAPTER 57 - THIRD PARTY LIABILITY

Chapter 57 describes the Third Party Liability (TPL) claims process. Among the topics covered by Chapter 57 are the statutory requirements for Third Party Liability (TPL) claims, the payment and denial of claims, the required components of forms used, and the Qualified Vendor's responsibilities. Chapter 57 is divided into the following subparts:

57-A	Introduction
57-B	Statutory Requirements for Other Payor (Third Party Liability) Claims
57-C	Payments and Denials
57-D	Explanation of Benefits
57-E	DES/DDD Waiver Requests
57-F	Denial Code Explanation and Other Payor/Third Party Liability
57-G	Responsibilities
57-H	Process for Updating Insurance Changes in Focus
57-I	Other Payor (Third Party Liability) Billing Scenarios
57-J	Recommendations for Working with Insurance Companies
57	Frequently Asked Questions - Appendix

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Provider Policy Manual Notification

Date: June 20, 2016

Revision Effective Date: June 17, 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 61 – Home and Community Based Services (HCBS) Certification and Provider Registration

Policy explains the HCBS Certification process and AHCCCS provider registration requirements.

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 12 – Billing and Encounter Submissions

- Changed "Billing Manual" to "Claims Submission Guide."
- Deleted statement "The provider must notify the Division Contract Management Unit within two (2) business days in the event their AHCCCS POS number changes."
- Clarified the use of the three types of claim forms used for Acute Care Services.
- Stated "Acute claims processed through QNXT™ must be billed with Healthcare Common Procedure Coding System (HCPCS)."

CHAPTER 16 – Explanation of Remittance Advice

- Changed “Billing Manual” to “Claims Submission Guide.”

CHAPTER 17 – Prior Authorization Requirements

- Links were updated
- Clarification regarding requests for prior authorizations after a service is rendered.
- Clarification regarding hours documented on the Service Plan and the requirement that services/tasks are to be delivered per the Service Evaluation.

CHAPTER 20 – Fraud, Waste, and Abuse

- Increased scope of Policy to cover waste
- Added definition of “waste”
- Stated that employees must receive adequate training addressing fraud, waste, and abuse
- Corrected non-functioning links

CHAPTER 22 – Formulary Information

- Provided an updated link to view the “Minimum Required Prescription Drug List (MRPDL).”
- Added a link to receive pharmacy updates directly from AHCCCS.
- Added a link to view a comprehensive list of AHCCCS medications.

CHAPTER 25 – Enrollment Verification

- Provided the correct/updated link for providers to check eligibility/enrollment, enter claims and check claim status.
-

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Provider 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 26 – CULTURAL COMPETENCY

- This revision added language per AHCCCS ACOM policy 416 which states the provider manual must reference the Civil Rights Act of 1964 VI.
 - Added the following language as the last paragraph in the policy: The Division acts in accordance with contractual obligations, state and federal codes and laws, including the Civil Rights Act of 1964 Public Law § 88-352 which prohibits discrimination in government agencies.
-

Reformatted:

The Provider Manual was reformatted to reflect current header style.

Revision History:

An incomplete posting of chapters 3, 58, 59, 60, was noticed and has since been remedied.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Provider Policy Manual Notification

Date: May 31, 2016

Revision Effective Date: May 27, 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 3 – PROVIDER SERVICES DEPARTMENTS

The contact information for providers who have complaints or questions was updated to reflect current practice.

CHAPTER 4 – COVERED AND NON-COVERED SERVICES

Included examples of covered Behavioral Health Services.

CHAPTER 6 – EARLY AND PERIODIC SCREENING, DIAGNOSIS AND TREATMENT (EPSDT)

As required by AHCCCS Operations Manual Policy 416, added references to coverage of comprehensive unclothed physical examination, laboratory tests, vision services, hearing services and dental services as specified in Arizona Administrative Code, R9-22-213.

CHAPTER 30 – CLINICAL PRACTICE GUIDELINES

Added statement saying that the Division may use the clinical practice guidelines provided by the U.S. Department of Health and Human Services.

Provided link to the Division's website page containing links to all of the clinical practice guidelines in use by the Division and its contracted health plans.

Reformatted Policy:

CHAPTER 7 – DENTAL

This chapter was reformatted by removing bullet points and adding outline format to conform to style. No language was changed.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Provider 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 58 - MEDICAL MANAGEMENT SERVICES

This chapter clarifies that Primary Care Providers (PCPs) are allowed to treat members diagnosed with anxiety, depression, and Attention Deficit Hyperactivity Disorder (ADHD). For the purposes of medication management, it is not required that the PCP be the member's assigned PCP.

CHAPTER 59 - BENEFIT COORDINATION AND FISCAL RESPONSIBILITY

This chapter clarifies that the Arizona Department of Health Services, either directly or through subcontractors, is responsible for the provision of all medically necessary covered behavioral health services to DD-ALTCS eligible members.

CHAPTER 60 - PROVIDER NOTIFICATION

This chapter clarifies how the Division provides notification to its network regarding material, operational, and Contract changes.

Revised Policy:

CHAPTER 23 - APPOINTMENT STANDARDS

Changed policy title from "AHCCCS Appointments and Standards" to "Appointment Standards."

Added explanation that policy establishes a process for the Division to monitor and report appointment accessibility and availability to ensure compliance with AHCCCS requirements.

Clarified requirements regarding specific types of appointments.
Defined "gap in critical service."

Revision History:

The revision dates for Chapters 3, 28, 32, 41, 43 were inadvertently changed from 1/29/2016 to 3/25/2016. They have been corrected to reflect the actual revision date of 1/29/2016. The revision notification for 3/25/2016 has been removed as it was duplicative of the 1/29/2016 posting.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Provider 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 Provider Manual as follows:

CHAPTER 3 - PROVIDER SERVICE DEPARTMENTS

Bullets were added under "Grievances/Complaints" under "Assistance offered"
Removed the Health plans from the chart and inserted below the added the statement:
Medical providers providing services for members enrolled with an acute care contractor should contact the appropriate Health Plan.

CHAPTER 41 – TERMINATION OF THE QUALIFIED VENDOR AGREEMENT UPON REQUEST OF THE QUALIFIED VENDOR

Division's Business Operations was deleted and replaced with Contract Management

All instances referencing the Qualified Vendor Agreement were changed to "Agreement"

CHAPTER 28 - MEMBER RIGHTS

References were edited to reflect updated location of policy.

CHAPTER 32 - SEPARATION OF CHILDREN AND ADULTS IN CENTER-BASED PROGRAMS

The language "for the purpose of this chapter, a therapy clinic is not considered a center-based program" was added

Under subsection "E" the words "health and" were added

CHAPTER 43 – RESPITE PROVIDED AT CAMP TO ALTCS MEMBERS

Under "Purpose" "The member must be eligible to receive Respite as determined by the Division" was added.

Under "Program Site Requirements for Camp" section "B" the words "direct care staff" was added.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Provider Manual Notification

Date: Friday, May 1, 2015

Final Division Provider Manual revisions have been incorporated into the current Division Provider Manual.

Chapter 42 Electronic Monitoring/Surveillance System In Program Sites

Removed "adult" from section B and added "Retention of Records" to section G for clarification to current Division practice.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities

Provider Manual Notification

Date: Monday, April 17, 2015

Final Division Provider Manual revisions have been incorporated into the current Division Provider Manual.

Chapter 7 Dental

This policy has been revised to include fluoride varnish as a covered dental service and providing additional clarification for members eligible to receive this service.

This will align the policy more closely with verbiage in AHCCCS CYE 2015 Dental services.

Chapter 43 Respite Provided At Camp To ALTCS Members (New Chapter)

This chapter has been added to clarify the requirements regarding this subject in accordance with current Division practice.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Provider Manual Notification

Date: Monday, April 6, 2015

Final Division Provider Manual revisions have been incorporated into the current Division Provider Manual.

Chapter 4 Covered and Non Covered Services

Language clarification in the Covered Services section of this chapter has been inserted to provide additional information regarding services. Services cannot be denied based on moral and religious grounds.

Chapter 28 Member Rights

This chapter has been revised to reference the current Division Policy Manual Chapter 300 Member Rights and Responsibilities.

Chapter 41 Termination of the Qualified Vendor Agreement Upon Request of the Qualified Vendor (New Chapter)

This chapter has been added to clarify the following new requirement in section six of the Qualified Vendor Agreement:

To outline the procedure when a Qualified Vendor Agreement terminates or is terminated. This includes member notification, member transition to new vendors, finalizing claims, and closing out client funds.

Chapter 42 Electronic Monitoring/Surveillance System In Program Sites (New Chapter)

This chapter has been added to clarify the requirements regarding this subject in accordance with State statutes.

Chapter 46 Agency With Choice (New Chapter)

This chapter provides information for Agency with Choice, a member-directed service delivery option.

Appendix A: QVADS Agency with Choice Provider Instructions – Agency with Choice Option

Appendix B: DDD Agency with Choice User Guide – FOCUS Vendor version 1.0

Division Forms: [Agency With Choice: Individual Representative](#) (DDD-1658A)

[Agency With Choice: Individual Representative](#) (Spanish) (DDD-1658S)

[Agency With Choice: Partnership Agreement](#) (DDD-1659A)

[Agency With Choice: Partnership Agreement](#) (Spanish) (DDD-1659S)

[ALTCS Service Model Options \(Decision Tree\)](#) (DDD-1626A)

[ALTCS Service Model Options \(Decision Tree\)](#) (Spanish) (DDD-1626S)

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Provider Manual Notification

Date: Monday, April 6, 2015

Approved Policy Not Yet Effective:

The Effective Dates for the following chapters have been extended to 04/15/2015.

Chapter 7 Dental

This policy has been revised to include fluoride varnish as a covered dental service. This will align the policy more closely with verbiage in AHCCCS CYE 2015 Dental services.

Effective Date: 04/15/2015

Chapter 43 Respite Provided At Camp To ALTCS Members (New Chapter)

This chapter has been added to clarify the requirements regarding this subject in accordance with current Division practice.

Effective Date: 04/15/2015

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Provider Manual Notification

Date: Friday, March 19, 2015

Revision Effective Date: Wednesday, April 1, 2015

Approved Policy Not Yet Effective:

Chapter 4 Covered and Non-Covered Services

Language clarification in the Covered Services section of this chapter has been inserted to provide additional information regarding services. Services cannot be denied based on moral and religious grounds.

Effective Date: 04/01/2015

Chapter 7 Dental

This policy has been revised to include fluoride varnish as a covered dental service. This will align the policy more closely with verbiage in AHCCCS CYE 2015 Dental services.

Effective Date: 04/01/2015

Chapter 28 Member Rights

This chapter has been revised to reference the current Division Policy Manual Chapter 300 Member Rights and Responsibilities.

Effective Date: 04/01/2015

Chapter 41 Termination of the Qualified Vendor Agreement Upon Request of the Qualified Vendor (New Chapter)

This chapter has been added to clarify the following new requirement in section six of the Qualified Vendor Agreement:

To outline the procedure when a Qualified Vendor Agreement terminates or is terminated. This includes member notification, member transition to new vendors, finalizing claims, and closing out client funds.

Effective Date: 04/01/2015

Chapter 42 Electronic Monitoring/Surveillance System In Program Sites (New Chapter)

This chapter has been added to clarify Division policy and the requirements regarding this subject in accordance with State statutes.

Effective Date: 04/01/2015

Chapter 43 Respite Provided At Camp To ALTCS Members (New Chapter)

This chapter has been added to clarify the requirements regarding this subject in accordance with current Division practice.

Effective Date: 04/01/2015

Chapter 46 Agency With Choice (New Chapter)

This chapter provides information for Agency with Choice, a member-directed service delivery option.

Appendix A: QVADS Agency with Choice Provider Instructions – Agency with Choice Option

Appendix B: DDD Agency with Choice User Guide – FOCUS Vendor version 1.0

Division Forms: [Agency With Choice: Individual Representative](#) (DDD-1658A)

[Agency With Choice: Individual Representative](#) (Spanish) (DDD-1658S)

[Agency With Choice: Partnership Agreement](#) (DDD-1659A)

[Agency With Choice: Partnership Agreement](#) (Spanish) (DDD-1659S)

[ALTCS Service Model Options \(Decision Tree\)](#) (DDD-1626A)

[ALTCS Service Model Options \(Decision Tree\)](#) (Spanish) (DDD-1626S)

Effective Date: 04/01/2015

Please send any questions to DDDPolicy@azdes.gov

Division of Developmental Disabilities
Provider Manual Notification

Highlights of this revision:

The Division's Provider Manual has been revised for clarity and for conformity with current practice.

Chapter 44 – Qualified Vendor Responsibilities for Planning Team Meetings

REVISION EFFECTIVE DATE: September 15, 2014

Revision:

- Revised responsibilities of the Qualified Vendor as a member of the Planning Team.
 - Revisions made to conform to current practice.

Please contact the [Policy Unit](#) if you have any questions.

Please send any questions to DDDPolicy@azdes.gov

Division of Developmental Disabilities

Provider Manual Notification

Revision Effective Date: See each Chapter below for effective date.

Highlights of this revision:

The Division's Provider Manual has been revised for clarity and for conformity with current legislation and practice.

Chapter 4-Covered and Non-Covered Services

REVISION EFFECTIVE DATE: August 1, 2014

Revisions:

- Insulin pumps removed from non-covered services.
 - Revision made to conform to change in legislation.

Chapter 32-Separation of Children and Adults in Center Based Programs

REVISION EFFECTIVE DATE: August 1, 2014

Revisions:

- Requirements regarding designated areas have been clarified:
 - B. Each site must have one area designated solely for children and one area designated solely for adults to prevent any interaction between the two age groups.*
 - C. Each site shall have a mechanism in place to provide a physical and visual barrier separating the two areas including:*
 - 1. Bathrooms; and,*
 - 2. Any interior space used for instruction, play, or similar activities.*
- Added "Approval shall be made at the sole discretion of the Division and may include a site visit."
- Internal procedures have been removed.
 - Revisions made for clarity.

Chapter 33 - RESERVED

NEW: Chapter 34-Provider Publications

INITIAL IMPLEMENTATION DATE: Effective upon signature of Amendment#1
RFQVA 710000

This Chapter has been added to clarify the following new requirement:

The Qualified Vendor shall provide to the Division for review and approval all reports or publications (written, visual, and/or audio communications) which are intended for members or applicants for services funded or partially funded by the Division.

Chapter 35-Progress Reporting Requirement

REVISION EFFECTIVE DATE: Effective upon signature of Amendment #1RFQVA
710000

Revisions:

- Incorporated into the Provider Manual the procedure posted on the Division's website that went into effect on July 1, 2013.
- Added "business" to "Monthly progress reports, due within 10 business days following each month, are required for the following services:"
- Added the following services to *Monthly Progress Reports*:
 - Habilitation, Consultation
 - Home Health Aide
 - Nursing
- Added the following services to *Quarterly Progress Reports*:
 - Habilitation, Early Childhood Autism Specialized
 - Nursing
 - Transition to Employment
- Added additional progress note element requirements to:
 - Home Health Aide
 - Nursing
 - Center Based Employment
 - Employment Support Aide
 - Habilitation, Early Childhood Autism Specialized
 - Individual Supported Employment
 - Therapies

- Due dates for Semi Annual reports corrected. "August 31st" changed to "July 31st"

Revisions made for conformity to current practice.

NEW: Chapter 36 – Safety (RESERVED)

This Chapter has been reserved for Chapter 1700 Safety, currently posted in the Division's Policy Manual.

NEW: Chapter 37 – Family and Caregiver Participation in Therapy Sessions

INITIAL IMPLEMENTATION DATE: Effective upon signature of Amendment#1
RFQVA 710000

This Chapter has been added to clarify the following requirement:

Qualified Vendors approved to provide therapy (i.e., Occupational, Physical, and Speech) must ensure a caregiver/responsible person is present and participates in all therapy sessions.

NEW: Chapter 38 – Emergency Communication When Transporting a Member

INITIAL IMPLEMENTATION DATE: Effective upon signature of Amendment#1
RFQVA 710000

This Chapter has been added to clarify the following new requirement:

For the health and safety of each member, the Qualified Vendor shall ensure that all methods of transportation allow for emergency communication at any time during the delivery of the service.

NEW: Chapter 44 – Qualified Vendor Responsibilities for Planning Team Meetings

REVISION EFFECTIVE DATE: August 1, 2014

Revisions:

- Information moved from Chapter 800 of the Division's Policy Manual.
 - Revisions made to conform to current practice.

Please contact the [Policy Unit](#) if you have any questions.

Please send any questions to DDDPolicy@azdes.gov.

Division of Developmental Disabilities
Provider Manual Notification

Revision Effective Date: April 16, 2014

Highlights of this revision:

The Division's Provider Manual has been revised for conformity with current practice, correction, and formatting correction.

All chapters in the Provider Manual:

All chapters in the Provider Manual have been revised to add page numbers.

Chapter 11-ALTCS Grievances, Claim Disputes, and Appeals

Revisions:

- "Family & Consumer Support Unit" changed to "Family and Community Resource Unit."
- "DDD Office of Appeals" changed to "DDD Office of Compliance and Review"
- Suite 600 changed to Suite 916
- Added "9th floor" and "Site Code 016F" to DDD Office of Compliance and Review's address.
- Revisions made for correction.

New: Chapter 32-Separation of Children and Adults in Center Based Programs

This is a new procedure for Qualified Vendors regarding the Service Utilization requirement of separating children and adults in center based settings that provide services to both populations.

Please contact the [Policy Unit](#) if you have any questions.



On September 6, 2021, the Pandemic Unemployment Assistance (PUA) and Pandemic Emergency Unemployment Compensation (PEUC) programs are scheduled to expire. The final payable week is the benefit week ending September 4, 2021.

Governor Doug Ducey and DES have announced Arizona's Back to Work Program, which provides child care assistance, return-to-work bonuses and educational incentives for eligible individuals. DES also provides a variety of workforce services and additional child care assistance for families. [Learn more about Arizona's Back to Work program.](#)

DES Services Related to COVID-19

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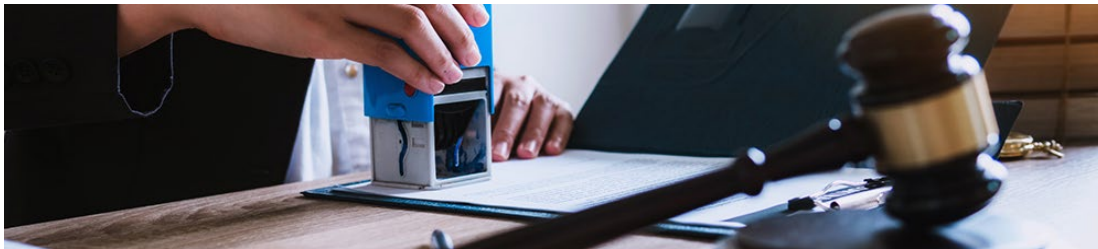
5799

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DDD Organizational Chart

Division Policies & Rules



Division Policies and Rules

DDD develops policies that conform to state, federal, and contractual requirements. DDD has five policy manuals, which include the Operations, Medical, Eligibility, Behavior Supports, and Provider manuals. Changes in policy are communicated to contracted DDD providers via electronic policy notifications, which are also sent to all DDD employees, Providers, Administrative Services Subcontractors, and individuals who have opted to receive notifications.

Please [complete this form](#) to be notified directly by email about changes to DDD policies and publications.

DDD welcomes comments and suggestions at any time. For more information regarding our policies and materials, contact DDD's Policy Unit via email at DDDPolicy@azdes.gov.

Interested individuals are encouraged to also sign-up to receive policy updates from the [Arizona Health Care Cost Containment System \(AHCCCS\)](#).

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Policy Manuals

All Policy Manuals have been moved to a single page to enable easier transition between manuals.

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