

July 2019

AHCCCS Adult Immunization Coverage at County Health Departments

Effective July 1, 2019, AHCCCS covers medically necessary covered immunizations for individuals 19 years of age and older when the vaccines are administered by AHCCCS registered providers through County Health Departments.

These immunizations are covered even if the AHCCCS registered provider is not in the member's health plan network.

AHCCCS covered immunizations include, but are not limited to:

Hepatitis A,
Hepatitis B, and
Measles.

Prior authorization is not required by AHCCCS FFS or AHCCCS Contractors for these services.

This means that AHCCCS now covers immunizations received by individuals 19 years of age and older at County Health Departments, when given by providers who are registered with AHCCCS.

For additional information about AHCCCS adult immunization coverage, refer to AMPM 310-M, Immunizations.

Questions? Email us at ProviderTrainingFFS@azahcccs.gov

Retroactive Coverage (also called Prior Quarter Coverage)

Beginning July 1, 2019 coverage for most newly eligible members will be retroactive to the first day of the month in which the Medicaid application is received.

Pregnant women and children up to age 19 exempt from this requirement.

- If an exempt individual is determined to qualify for AHCCCS during any one or more of the three months prior to the month of application, then the individual will be determined to have "Prior Quarter Coverage" eligibility during those months.

Providers are encouraged to utilize the Health-e-Arizona Plus (HEAplus) application process to assist in enrolling uninsured patients into AHCCCS coverage. HEAplus offers the most accurate, credible, real-time eligibility determinations for

public assistance programs such as AHCCCS to help providers better manage their patients' payment source. HEAplus will shorten the eligibility determination timeframe and simplify the process for members and providers. Anyone can access www.healthearizonaplus.gov from any internet connection. Today, hundreds of locations throughout the State use HEAplus to help Arizonans. More information about HEAplus, including how to become a Contracted Community Partner can be found on the link below:

HEAplus

For additional information about Retroactive Coverage and a Frequently Asked Questions (FAQs) PDF, please visit the AHCCCS website.

CONTACTS

For provider training questions and technical assistance with the online web portal please outreach the Provider Training Division of DFSM through email at ProviderTrainingFFS@azahcccs.gov.

Prior Authorization Questions FFS PA Line (602) 417-4400

Claims Customer Service Billing Questions (602) 417-7670

Provider Registration Process Questions (602) 417-7670

Fax Applications (602) 256-1474

ELECTRONIC PAYMENT SIGN UP

Contact: ISDCustomerSupport@azahcccs.gov -OR- call 602-417-4451

Direct Care Worker Agency Monitoring

In 2019, DFSM plans to conduct annual monitoring of Direct Care Service Agencies serving Tribal ALTCS members who live in their own homes. The monitoring will ensure the provision of:

- Service delivery in accordance with authorizations and the member's needs,
- Quality of care for members, and
- Training and supervision of Direct Care Workers.

Monitoring will be occurring at least once a year via a desk level audit, and it will incorporate elements from [AMPM Chapters 900 and 1200](#).

It will be based on the following six Direct Care Agency standards:

Standard 1: The Direct Care Agency shall perform periodic supervisory visits to ensure quality services are provided by the Direct Care Worker.

Supervisory visits must be documented in the member's case file and cross-referenced in the Direct Care Worker's personnel files.

Standard 2: The Direct Care Agency ensures that the Direct Care Worker Agency supervisor completes a performance evaluation of the Direct Care Worker while the Direct Care Worker is present.

The Direct Care Agency must also ensure that supervisors follow supervisory visit timeframes.

Standard 3: The Direct Care Agency must ensure that supervisors meet timeframes and conduct Supervisory Visits that do not require the Direct Care Worker's presence.

The timing of these supervisory visits for the first 90 days is based on the date of the initial service provision, and not the date of the initial service authorization.

- The first Supervisory visit occurs before the 5th day from the date of initial service provision, and the visit did not occur on the date of the initial service provision.

- The 30th day Supervisory visit occurs on/within five days after due date.
- The 60th day Supervisory visit occurs on/within five days after due date.
- The 90th day Supervisory visit occurs on/within five days after due date.
- Ongoing 90th day Supervisor visits occur at least every 90 days from the previous visit. This visit must not occur more than five days after its due date.

Standard 4: The Direct Care Agency is responsible for ensuring compliance with the Training and Testing Period standards.

All documentation of testing and training must be in Direct Care Worker's personnel file.

- Please note that the DCW must have current CPR and first aid certifications, prior to providing care to an ALTCS member.

Standard 5: The Direct Care Agency is responsible for ensuring the Direct Care Workers have six hours of continued education annually.

Continued education shall include training on relevant topics (Principles of Caregiving, Alzheimer's Disease and Other Dementias" modules developed by representatives of residential care, home and community based care, experts in the fields of communication, and behavior). The same topics cannot be repeated year after year.

Standard 6: The Direct Care Agency shall integrate the use of the AHCCCS Direct Care Worker and trainer testing records online database into day to day business practices.

The primary purpose of the online database is to serve as a tool to support the portability or transferability of Direct Care Worker or trainer testing records from one employer to another employer.

Behavioral Health Residential Facility (BHRF) Per Diem Rate Information

AHCCCS has received questions regarding what is and what is not included in the per diem rate for Behavioral Health Residential Facilities (BHRFs). The following information can be found in the AHCCCS Medical Policy Manual (AMPM), [Policy 320-V, Behavioral Health Residential Facilities](#).

Care and services provided in a BHRF are based on a **per diem rate (24-hour day)**, require prior and continued authorization and **do not include room and board**.

NOTE: Prior Authorization is not required for IHS/638 providers.

The following services shall be made available and provided by the BHRF and cannot be billed separately, unless otherwise noted below:

- a. Counseling and Therapy (group or individual):
 Note: Group Behavioral Health Counseling and Therapy may not be billed on the same day as BHRF services unless specialized group behavioral health counseling and therapy have been identified in the Service Plan as a specific member need that cannot otherwise be met as required within the BHRF setting;
- b. Skills Training and Development:
 - i. Independent Living Skills (e.g. self-care, household management, budgeting, avoidance of exploitation/safety education and awareness);
 - ii. Community Reintegration Skill building (e.g. use of public transportation system,

understanding community resources and how to use them); and

- iii. Social Communication Skills (e.g. conflict and anger management, same/opposite-sex friendships, development of social support networks, recreation).
- c. Behavioral Health Prevention/Promotion Education and Medication Training and Support Services including but not limited to:
 - i. Symptom management (e.g. including identification of early warning signs and crisis planning/use of crisis plan);
 - ii. Health and wellness education (e.g. benefits of routine medical check-ups, preventive care, communication with the PCP and other health practitioners);
 - iii. Medication education and self-administration skills;
 - iv. Relapse prevention;
 - v. Psychoeducation Services and Ongoing Support to Maintain Employment Work/Vocational skills, educational needs assessment and skill building;
 - vi. Treatment for Substance Use Disorder (e.g. substance use counseling, groups); and
 - vii. Personal Care Services (see additional licensing requirements in A.A.C. R9- 10-702, R9-10-715, R9-10-814).

Covered Behavioral Health Services Guide – Important Notice

In early 2019, information contained within the AHCCCS Covered Behavioral Health Services Guide (CBHSG) will be transitioned into the following areas:

- AHCCCS Medical Policy Manual ([AMPM Policy 310-B, Behavioral Health Services Benefit](#))
 - Title XIX/XXI benefit information.
- [AMPM Policy 320-T, Non-Title XIX/XXI Behavioral Health Services](#)

- Non-Title XIX/XXI service information.
- Appropriate AMPM Policies as necessary, including:
 - AMPM Policy 310-BB, Transportation; and
 - AMPM Policy 310-V, Behavioral Health Residential Facilities (BHRFs).

continued on next page

Covered Behavioral Health Services Guide Continued

- The Fee-For-Service (FFS) and IHS/Tribal Provider Billing Manuals
 - [Chapter 19, Behavioral Health Services, FFS Provider Billing Manual](#)
 - Behavioral Health services billing information for FFS Providers
 - **Note:** Billing information in the FFS Provider manual is primarily directed to FFS providers; however, the general billing information not identified as specific to FFS providers may also be referred to by ACC (MCO) providers. For FFS Providers, any billing information noted as specific to ACC (MCO) only
- [Chapter 12, Behavioral Health Services, IHS/Tribal Provider Billing Manual](#)
 - Behavioral Health services billing information for IHS/Tribal Providers.

does not apply to FFS.

For providers serving AIHP/FFS members, the DFSM Provider Training team can be reached at Provider-TrainingFFS@azahcccs.gov.

Providers serving ACC plan members should refer to the enrolled ACC plan billing manual, and/or contact the ACC plan directly for billing related questions.

Training Schedule for 3rd Quarter

Behavioral Health Residential Facility (BHRF) Training

Behavioral Health Residential Facility (BHRF) Overview and PA Submission Training

How to submit a PA request for BHRF providers only.

WebEx only training dates below:

- **July 10, 2019 Wednesday 10:00am – 11:30am**
- **August 06, 2019 Tuesday 9:00am – 10:30am**
- **September 04, 2019 Wednesday 10:00am – 11:30am**

General Direct Care Agency (DCA) Worker Training

General Direct Care Agency (DCA) Worker Training: Audit Tool

The purpose of this training is to ensure the safety of members and the Quality of Care they are receiving.

WebEx only training dates below:

- **July 16, 2019 Tuesday 10:00am – 11:00am**
- **August 14, 2019 Wednesday 9:00am – 10:00am**
- **September 04, 2019 Wednesday 12:00pm – 1:00pm**

AHCCCS Online Claim Submission Training/Daily Trip Report/ NEMT Providers

AHCCCS Online Claim Submission Training/ DTR / NEMT Providers

How to submit a claim using the AHCCCS Online Web Portal.

WebEx only training date below:

- **July 17, 2019 Wednesday 11:00am – 12:00pm**

AHCCCS Online Claim Submission Training – Direct Care Agency

AHCCCS Online Claim Submission Training – Direct Care Agency

How to submit a claim using the AHCCCS Online Web Portal.

WebEx only training date below:

- **July 17, 2019 Wednesday 1:00pm – 2:00pm**

Training Schedule for 3rd Quarter Continued

One on One Provider Training Sessions

One on One Provider Training

By Appointment only. Availability for one-on-one provider sessions on **AHCCCS Policies and Billing Procedures**. Email ProviderTrainingFFs@azahcccs.gov to schedule a training session. _

Provider Training may cover the following topics:

- Online Claim Submission (AHCCCS Online)
- Online Prior Authorization Submission
- Transaction Insight Portal

Available Training Session dates below:

- July 16, Tuesday 1:00pm – 2:15pm
- July 23, Tuesday 9:00am – 10:15am
- July 23, Tuesday 10:30am – 11:45am
- August 14, Wednesday 10:15am – 11:15am
- August 14, Wednesday 11:30am – 12:30am
- August 22, Thursday 9:00am – 10:15am

- August 22, Thursday 10:30am – 11:45am
- September 11, Wednesday 9:00am – 10:15am
- September 11, Wednesday 10:30am – 11:45am
- September 19, Thursday 9:30am – 10:45am
- September 19, Thursday 11:00am – 12:15am

IHS/638 Quarterly Forum

IHS/638 Quarterly Forum

Discussion of policy updates, changes, or challenges AHCCCS and the IHS Facilities are experiencing.

IHS/638 Quarterly Forum date:

- **August 01, 2019 Thursday 2:00pm – 3:30pm**

Office of Administrative Legal Services

Office of Administrative Legal Services – Claims Dispute Process

WebEx only date and time to be announced.