

DATE: March 25, 2024

**SUBJECT: Clarification of appropriate use of Respite Services AMPM 310B and 1250-D**

This memo is being sent to all contracted health plans to alert you to a concern that has come to the attention of AHCCCS regarding the use of Respite services as defined in both AMPM 310-B and 1250-D. It has been reported that providers are prescribing respite hours to members as time for relief, reflection and relaxation of the member rather than a caregiver. AHCCCS policy and Section 1115 Demonstration Waiver clearly outline the circumstances and limitations of respite and require that all providers follow these guidelines. Respite services prescribed in any manner other than as specified below are not eligible for reimbursement.

In accordance with AMPM 310-B: Unskilled respite care (respite) is short term behavioral health services or general supervision that provides an interval of rest or relief to a family member or other individual caring for the member receiving behavioral health services as authorized under the Section 1115 Waiver Demonstration and delivered by providers who meet the requirements in A.A.C. R9-10-1025 and A.A.C. R9-10-1600.

In accordance with AMPM 1250-D: Respite Care is provided as an interval of rest and/or relief to a family member or other individual caring for an ALTC member. Respite Care may be provided by a respite provider coming to the member's home, or by admitting the member to a licensed institutional facility or an approved Alternative HCBS setting for the respite period. Respite care may only be delivered as specified in the member's Person Centered Service Plan and requires prior authorization by the case manager.

