Prior Authorization Tool:

Use our AHCCCS FFS Prior Authorization Guide tool to see if a prior authorization is needed. This list indicates which services require a prior authorization. It's quick and easy. If an authorization is needed, you can access our AHCCCS Online Provider portal and submit the PA electronically.

New EDI Solutions Portal:

EDI Solutions portal replaced the transaction insight portal to upload required documentation to the claim submission. Providers who have not signed up to use the EDI portal should do so. To access the EDI Solutions portal ServiceNow to upload documents. The EDI portal cannot be used to upload documents to a Prior Authorization case.

Reminders: Fee-For-Service (FFS) Claims Billing

- Submit claims as quickly as possible.
- Verify the coding details on the claim to avoid errors.
- If the claim or a specific line of service denies, review the claim first with your coder to determine what is required for correction.
- Check the member's Medicaid enrollment prior to the submission of the claim.

Covered Behavioral Health Service Guide

Covered Behavioral Health Service Guide AHCCCS has published an update to the Covered Behavioral Services Guide with a date 12/23/2024. Always make sure you have the most current version if you are downloading these documents.

The AHCCCS Covered Behavioral Health Services Guide (CBHSG) is updated and published as needed. Refer to the CBHSG below:

- **AHCCCS Covered Behavioral Health Services Guide** (posted 12/23/2024)

Email Addresses

Coding related to table updates should be sent to the Medical Coding Unit our email is: codingpolicyquestions@azahcccs.gov

Rates related questions should be submitted to: ffsrates@azahcccs.gov DFSM-FFS Provider

Training or billing questions should be submitted to: https://servicenow.azahcccs.gov/gsp

AHCCCS policies can be found here: https://azahcccs.gov/PlansProviders/GuidesManual-sPolicies/index.html

The DFSM Claims Clues is a monthly newsletter that provides information about changes to the program, system changes/updates, billing and FFS policies.

Claims, Prior Authorization and Provider Enrollment inquires: The Division of Member and Provider Services (DMPS) manages the service calls for AHCCCS Fee-for-Service. DMPS can assist providers with prior authorizations, claim inquires and status and provider registration (APEP) questions and processes.

The hours of operation are Monday – Friday, 7:30am-5:00pm (602-417-7670).

AHCCCS Provider Enrollment Portal (APEP): Questions regarding provider-related enrollment, policy, or APEP user issues email APEPTrainingQuestions@azahcccs.gov . Your email will automatically create a service ticket to Provider Enrollment for assistance.

AHCCCS Warrents - For questions about Warrants, paper EOBs or Electronic Fund Transfers (EFT), contact the Division of Business & Finance (DBF) at (602) 417-5500.

835 Electronic Remittance Payment Sign Up (Remittance Advice Sign Up/835) Contact: ServiceDesk@azahcccs.gov or call (602) 417-4451

To upload documents to the new EDI Solutions portal ServiceNow, users will need to have access. If you do not have an account, please follow the instructions outlined in the EDI Portal Provider Signup and Login Guide.

Training materials for FFS Providers and upcoming Provider Training Sessions can be found on the DFSM Provider Training Web Page .

For provider training questions please outreach the Provider Training Team via email at ServiceDesk@azahcccs.gov

COVID FAQ: FAQ COVID Fact Sheet

Reminders: Fee-for-Service Prior Authorization

Check member eligibility

Before filing a Prior Authorization request, ensure the patient is eligible for the proposed service.

Determine if a code or service requires Prior Authorization

Identifying if a service requires an authorization is easy. Providers can refer to the FFS PA guide, perform a CTRL+ F search, and enter the CPT/HCPCS code.

Providers should not submit PA requests for services that are not on this list. Submitting unnecessary PA requests can cause delays and additional work for providers and the PA staff.

AHCCCS FFS Prior Authorization Guide

Submit a PA request via the AHCCCS Online Provider Portal. The online portal is secure and is specifically for AHCCCS FFS Providers. Within the Provider Portal, providers can verify claim status, member eligibility for FFS, ALTCS and MCO plans, provider enrollment, claim submission, PA (Prior Authorization) Inquiry find information on each of the following key items:

Make sure to include any supporting documentation for the request and the information is complete and correct. Make sure the PA request is submitted timely and all three steps are completed. Many times the last step in the process which is completing the Activity tab is missed. Also having a plan for following up on authorizations can ensure the process is completed on time.

Selecting the Correct PA Event Type

Check the Status of the Prior Authorization

After submitting a Prior Authorization request, it's crucial to follow up and determine its status via the Provider Online portal. Requests for status should not be submitted via the service ticket portal.