



**EXHIBIT 1620-20, PRIOR AUTHORIZATION OF SERVICES FOR
ALTCS MEMBERS**

Services provided to ALTCS E/PD and Tribal ALTCS members receiving Home and Community Based Services (HCBS) require authorization by the Contractor, the Tribal ALTCS Program for Tribal ALTCS members, or the member's Primary Care Provider (PCP) and/or AHCCCS as follows:

SERVICE	PRIMARY CARE PROVIDER (PCP) ORDERS (ALTCS CONTRACTOR FOR ENROLLED MEMBERS)		AHCCCS PRIOR AUTHORIZATION (FFS MEMBERS ONLY)	CONTRACTOR SERVICE AUTHORIZATION	
	E/PD	DDD	E/PD	E/PD	DDD ¹
Acute Hospital Admission (Non-Medicare Admission)	X	X	X	X	X
Adult Day Health Services				X	N/A
Attendant Care				X	X
Behavioral Health Services	X	X		X	X
Community Transition Service			X	X	X
Emergency Alert	X	X		X	X
Habilitation				X	X
Home Delivered Meals		N/A		X	N/A
Home Health Agency Services	X	X		X	X
Home Modifications	X	X	X	X	X
Homemaker Services				X	X
Hospice Services (HCBS and Institutional) [Non Medicare]	X	X		X	X
Intermediate Care Facilities (ICF)	N/A	X		N/A	X
Medical Equipment /Medical Supplies	X	X	X ²	X	X
Nursing Facility Services	X	X		X	X
Physical Health Care Acute Services	X	X	X	X	X
Personal Care				X	X
Respite Care (in-home)				X	X
Respite Care (Institutional)	X	X		X	X
Therapies	X	X		X	X
Transportation				X	X

¹ Some services are provided by and, therefore, authorized by DDD subcontracted-health plans

² Medical Equipment over \$500 for FFS members requires approval from AHCCCS/DFSM/CMSU via the Tribal case manager. Medical Equipment from \$300 to \$499 requires approval from the FFS case manager.