

DATE: August 4, 2017
TO: Holders of the AHCCCS Medical Policy Manual
FROM: Contracts and Policy Unit
Division of Health Care Management, AHCCCS
SUBJECT: AHCCCS Medical Policy Manual (AMPM)

This memo describes revisions and/or additions to the AMPM.

Please direct questions regarding policy updates to the Contracts and Policy Unit at 602-417-4295 or 602-417-4055 or email at DHCMContractsandPolicy@azahcccs.gov.

PLEASE NOTE: We are currently converting the AMPM Headers and Footers to a new format, aligning Policy language for consistency, and changing Exhibits to Attachments. Changes will be done over the next several months. In addition, Arizona Law 2015, Chapter 19 Section 9 (SB 1480) enacts that from and after June 30, 2016 the provisions of behavioral health services under Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS) is transferred to and shall be administered by AHCCCS. We are in the process of transferring all pertinent documents to AHCCCS.

UPDATES AND REVISIONS TO THE AHCCCS MEDICAL POLICY MANUAL (AMPM)

To view the policies and attachments, please access the following link:

AHCCCS MEDICAL POLICY MANUAL (AMPM)

CHAPTER 1200, POLICY 1220-C, PRE-ADMISSION SCREENING AND RESIDENT REVIEW (PASRR)

AMPM Policy 1220-C underwent minor technical revisions consistent with applicability of the Policy, its purpose, and aligning language across AHCCCS Policies. A reference to the Level II invoice was corrected.

CHAPTER 1200, POLICY 1250-A, BEHAVIORAL HEALTH SERVICES

AMPM Policy 1250-A was reserved, due to duplicative language in Contract and other policies, including AMPM Chapters 300 and 1600 as well as, the AHCCCS Covered Behavioral Health Services Guide available on the AHCCCS website.

CHAPTER 1200, POLICY 1250-B, HOSPICE SERVICES

AMPM Policy 1250-B was reserved, because this policy is duplicative of language contained in AMPM Policy 310-J.

APPROVED NOT YET EFFECTIVE

To view the policies and attachments, please access the following link:

[AMPM Approved Not Yet Effective](#)

The following Policies are posted for reference. However, the below Policies will not be in effect until the date referenced in each Policy. Policies which are newly approved but not yet effective will be added at the beginning of this section.

CHAPTER 300, POLICY 310-HH, END OF LIFE CARE

AMPM Policy 310-HH is a new policy that establishes guidelines, medical criteria and requirements for End of Life care and the provision of Advance Care Planning. The End of Life concept of care strives to preserve member rights and dignity, while receiving appropriate health care services and practical supports. *The effective date for this policy will be 10/1/2017.*

CHAPTER 300, POLICY 310-J, HOSPICE SERVICES

AMPM Policy 310-J has been revised to include applicability to all Contractors and FFS Programs, to clarify guidelines for allowable hospice services for terminally ill members pursuant to A.R.S. §36-2907, A.R.S. §36-2989 and 42 CFR 418.20. It clarifies that members under age 21 may receive curative treatment concurrently with hospice services. Further, the definition of palliative care was removed, and the various components comprising hospice services were defined. *The effective date for this policy will be 10/1/2017.*

CHAPTER 300, POLICY 320-P, SERIOUS MENTAL ILLNESS ELIGIBILITY DETERMINATION.

AMPM 320-P was updated to include applicability to ALTCS EPD and Tribal ALTCS, due to retention of Serious Mental Illness (SMI) designation in contracts effective October 1, 2017. Language was added to clarify that assessments begin at age 17.5, and outline which entity receives information regarding decertifications. *The effective date for this policy will be 10/1/2017.*

CHAPTER 500, POLICY 520, MEMBER TRANSITIONS

AMPM Policy 520 was revised to incorporate new managed care regulations at 42 CFR 438.62, requiring specific continued services during the transition period for members transitioning from a FFS to MCO Provider, or transitioning to adulthood in the behavioral health system. Revisions also accounted for out of service area/placement system updates to ensure non-integrated members receive appropriate physical and behavioral health services. *The effective date for this policy will be 10/1/2017.*

CHAPTER 1200, POLICY 1250-C, ACUTE CARE SERVICES

AMPM Policy 1250-C was revised to incorporate a reference to the emergency dental benefit for members age 21 and older, which was approved by the 53rd Arizona Legislature for State Fiscal Year 2018. Additionally, minor revisions were made to streamline, clarify and organize content. *The effective date for this policy will be 10/1/2017.*

CHAPTER 1600, POLICY 1610, COMPONENTS OF ALTCS CASE MANAGEMENT

AMPM 1610 underwent minor technical revisions consistent with applicability of the Policy, its purpose, and aligning language across AHCCCS Policies. *The effective date for this policy will be 10/1/2017.*

CHAPTER 1600, POLICY 1620-C, COMPONENTS OF ALTCS CASE MANAGEMENT

AMPM 1620-C underwent minor technical revisions consistent with applicability of the Policy, its purpose, and aligning language across AHCCCS Policies. A reference was added to the *Tutorial Guide for Pre-Paid Medical Management Information Systems Interface for ALTCS Case Management*, (formerly, ACOM policy 411) available on the AHCCCS website. *The effective date for this policy will be 10/1/2017.*