

**DATE:** April 10, 2020  
**TO:** Holders of the AHCCCS Medical Policy Manual  
**FROM:** DHCM Contracts and Policy  
**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](mailto:DHCMContractsandPolicy@azahcccs.gov).

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

**AHCCCS Medical Policy Manual (AMPM)**

**AMPM POLICY 310-DD, COVERED TRANSPLANTS AND RELATED IMMUNOSUPPRESSANT MEDICATIONS**

AMPM Policy 310-DD was revised to bring the medical necessity criteria up to date and to align with A.A.C R9-28-101. The Policy was also revised to include the removal of specific organ based criteria including indications/contradictions due to the dynamics of the field, and based on the recommendations of Public Consulting Group (PCG). Changes to the policy also included national standards such as Organ Procurement And Transplantation Network (OPTN), United Network For Organ Sharing (UNOS), Foundation For The Accreditation Of Cellular Therapy (FACT) and Centers for Medicare & Medicaid Services (CMS).

- **ATTACHMENT A, EXTENDED ELIGIBILITY PROCESS/PROCEDURE FOR COVERED SOLID ORGAN AND TISSUE TRANSPLANTS**

No changes.

**POST TRIBAL CONSULTATION NOTIFICATION/PUBLIC COMMENT CHANGES:**

AMPM Policy 310-DD was revised to further clarify original changes after being posted for Tribal Consultation Notification/Public Comment on 01/30/20.

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**APPROVED NOT YET EFFECTIVE**

**AMPM Approved Not Yet Effective**

**AMPM POLICY 310-B, BEHAVIORAL HEALTH SERVICE BENEFIT**

**AMPM POLICY 965, COMMUNITY SERVICE AGENCIES**

**AMPM POLICY 1200, RESERVED**