

2nd Quarter 2019 ACC Plan Updates

Pending Updates to AMPM

AMPM Policy 965 is listed as pending implementation - However, providers should keep checking implementation status because the policy outlines standardized requirements and processes for credentialing Community Service Agencies (CSAs), and includes attachments, such as the initial application and credentialing amendment requests, documentation submission standards, a criminal history affidavit and a self-declaration of criminal history form.

Crestline consultants are highly experienced individuals with expertise in every area, from finance to data analysis to healthcare. I have used their services on numerous projects and have always found Crestline to provide timely results of the highest quality. I highly recommend them.

- Laura Larson-Huffaker, M.C., LPC
CEO, Horizon Health and Wellness

Arizona Complete Care Health Plan and RBHA Updates

Several ACC Plans released informational bulletins regarding the recent statewide outbreak of hepatitis A, including information on high risk populations and how providers can register for ASIIS (Arizona State Immunization Information System) to aid providers and public health track individuals who have been vaccinated and identify individuals who still need to be vaccinated.

Arizona Complete Health:

- Arizona Complete Health has contracted with Professional Health Care Network (PCHN) for home health network management services. (6/6/2019)

Banner University Family Plan:

- Behavioral Health Prior Authorization Training will be offered on July 29, 2019 in Maricopa County, and August 1, 2019 in Pima County. The announcement includes a [link for providers to RSVP](#) at least a week prior to the training session. (7/2/2019)
- An informational bulletin for members and provider affected by the Woodbury Wildfire, including contact information for those needing assistance. (6/20/2019)
- An information bulletin on the Office of Individual and Family Affairs (OIFA) was released that includes fliers for individuals who may be interested in coming to a BUFC/ACC OIFA New Member Orientation session (5/17/2019)

Care 1st :

- Notice of formulary changes that will be effective 8/1/2019. A summary of the formulary changes can be found on the Care1st Provider formulary webpage. (7/1/2019)
- Care1st announced its exit from the DDD line of business effective 10/1/2019, and included additional detail regarding the new DDD Health Plans, member notices, and links to information on the ADES website. (6/25/2019)
- The Care1st integration into Wellcare (their parent company) was postponed, additional detail regarding specific system and platform changes were included in the notice (6/3/2019)
- Announcement of Wellcare entering into an agreement to merge with Centene. (5/07/2019)

Magellan:

- Provider Webinars will be held on July 19th and August 16 from 10am-11am. Online access and call in number are available on [Magellan's provider training page](#).

Mercy Care:

- Announced new reference guides for Crisis/State-only membership Services and Non-Title Enrollment. (6/14/2019)
- New prior authorization requirements are being implemented for subacute services (provider types B5 and B6). These requirements include notice within 24 hours of admission effective 6/17/2019 and prior authorizations for admissions and continued stays for DOS starting 7/22/2019. (6/12/2019).
- Issued clarification regarding the use of the GT modifier (interactive audio and video telecommunication systems) with service code H0038 (Self-help/peer services). (6/5/2019)
- Effective June 15, 2019, in addition to prior authorizations required by AHCCCS AMPM Policy 320-V, Mercy Care will require prior authorization for all admissions and continued stays at BHRFs that primarily provide substance use. The notice includes details regarding the prior authorization requirements and process, including how to access and submit the prior authorization form. (6/7/2019)
- Effective July 1, 2019, Mercy Care is changing the timely filing from 180 days to 150 days. (5/23/2019)
- Announced AHCCCS updates to the [EPSDT Tracking Form, Policy 430, Attachment E](#). (5/20/2019)
- AHCCCS Medical Coding Unit is developing a [Medical Coding Resources webpage](#). (5/5/2019)
- Effective May 15, 2019, providers are required to use over the phone (OPI) or video-remote interpreting (VRI) for interpretation session that are one hour or less. (5/3/2019)
- Announcement of pharmacy changes that were effective May 1, 2019. (5/1/2019)

Steward Health Care Network:

- Reminder that Steward recommends all providers submit claims/encounters electronically. (7/2019)
- Notice of formulary changes that will be effective 8/1/2019 (6/2019)
- Reminder that AHCCCS guidelines require all rendering physicians and mid-level practitioners to bill under their own NPI number, including information on exceptions for locum tenens. (6/2019)
- Provided information on how requirements for submission of BHRF (excluding those that are for substance use disorders only and respite), including process and contact information. (5/2019)

United Healthcare:

- Shared information from ASU Center for Applied Behavioral Health Policy regarding free Buprenorphine Waiver Training for Physicians, Nurse Practitioners and Physician Assistants on 7/16/2019, and information on Medication-Assisted Treatment (MAT) Curricula. (6/29/2019)
- Announcement regarding changes to the DD program that will be effective 10/1/2019. (6/19/19)
- Shared an AHCCCS memo clarifying requirements for providers to submit claims to commercial insurance carriers before submitting claims to AHCCCS contractors. (5/31/2019)
- Information for PCPs regarding when they can provide medication management and medication MAT services. (5/01/2019)
- Effective 8/15/2019, resubmitted claims must have claim reference number listed in the required field. Failing to include the required claim reference number may result in the claim being denied and may impact prior payments made. (5/15/2019) No Alerts, Bulletins or News updates were posted for April 2019