

3rd Quarter 2019 ACC Plan Updates

Pending Updates to AMPM

AHCCCS has updated several AMPM Policies related to behavioral health services with an implementation date of 10/1/2019, including 320-O Behavioral Health Assessments and Treatment Service Planning, 320-R Special Assistance for Members with SMI, and 320-V Behavioral Health Residential Facilities. The changes primarily include general formatting, aligning AMPM policies to the AHCCCS Covered Services Behavioral Health Guide, and to address system changes such as DDD integration and implementation of ACC plans.

Implementation of changes to AMPM Policies 320-S Applied Behavioral Analysis, and 965 Community Service Agencies (CSAs) have been pending to allow for additional review.

Arizona Complete Care Health Plan and RBHA Updates

Several ACC Plans released informational bulletins reminding providers to encourage members to get flu shots and other adult immunizations. Many plans also released announcements regarding the transition of DDD services that was effective on 10/1/2019.

Arizona Complete Health:

- Introduced VerfiyHCP®, which allows providers to validate and update directory information. (9/11/2019)
- Expanded prior authorization request time for certain non-behavioral health services. (9/10/2019)
- Announced that effective 10/1/2019, Arizona Complete Health will launch a new Surgical Quality and Safety Management Program. (8/29/2019)
- Released an updated AHCCCS preferred drug list that became effective 8/1/2019. (7/16/2019)
- Shared a communication from the Pima County Health Department regarding a recent spike in Fentanyl-related overdose deaths in Pima County. (7/15/2019)

Banner University Family Plan:

- Announced updates to the Banner University Family Plan Provider Manual. (10/1/2019)
- Issued the Banner University Health Plan Quarter 3 Provider Newsletter, which includes updates related to e-prescribing of controlled substances, opioid safety edits, AHCCCS measures for monitoring well care visits for children and adolescents, Child and Family Team requirements, and development of a Children's Specialty Behavioral Health Provider Directory to support coordination of care. (9/25/2019)
- Shared information regarding a STAR Health & Wellness Fair that was held in September. (9/17/2019)
- Shared the AHCCCS flier regarding the July Community Forums on the Future of RBHA Services. (7/9/2019)

Care 1st:

- Announced updates to prior authorization guidelines effective 11/1/2019. (9/30/2019)
- Announced Care1st's Fall 2019 Provider Forum held on 9/25/2019 and 9/27/2019. (9/11/2019 & 9/18/2019)
- Provided instructions on mailing of records, claims correspondence and appeals. (9/5/2019)
- Announced the September Cultural Competency Conference. (9/5/2019)
- Announced that effective 9/1/2019, COB information may be submitted electronically. (8/30/2019)
- Released an updated AHCCCS preferred drug list effective 10/1/2019. (8/28/2019)
- Provided clarification that services billed on a CMS1500 for dual eligible members covered by both WellCare Liberty and Care1st do not require providers to submit a secondary billing, as WellCare Liberty claims are automatically crossed over internally for secondary processing by Care1st (excluding DME, Home Health Care, FQHC/RHC, and MSIC/Integrated Clinics). (8/23/2019)
- Announced the availability of Surescripts Electronic Prior Authorization system, allowing providers to identify requirements for and process prior authorization during the e-prescribing process. (8/16/2019)

Magellan Complete Care:

- Announced updates to Magellan Complete Care member ID cards, effective 7/25/2019, and updated claims mailing address on the back of the card.
- Announced updates to prior authorization codes effective on 10/1/2019, including certain ABA services and Neuropsychological testing.
- Announced that prior authorization will not be required for outpatient physical, occupational and speech therapy as well as unattended sleep studies effective 10/21/2019. (8/30/2019)

"Sue Dess and Crestline have been instrumental in moving Hope Haven forward, both in navigating the world of Managed Care and in Strategic Planning. What Crestline has done for Hope Haven will have life-changing ripple effects for years. We're proud to be associated with this exceptional organization."

- Matthew Buley
CEO, Hope Haven, Inc.

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Arizona Complete Care Health Plan and RBHA Updates

Mercy Care:

- Announced Non-Title (NTXIX) funding changes effective 11/1/2019, including a defined NTXIX network, and a move from fee-for-service to block funding reimbursement for NTXIX network providers. (10/3/2019)
- Announced changes to prior authorization of Applied Behavioral Analysis (ABA) CPT Codes (97153-97158), effective 11/1/2019. This requirement excludes ABA Assessments (97151 and 97152), and provides a 180 day waiver for members who transitioned to Mercy Care DD on 10/1/2019. (10/1/2019). The announcement also includes ABA CPT code definitions.
- Shared information regarding HB 2075, requiring electronic prescribing of Schedule II controlled substances that are opioids. The requirements will go into effect on 1/1/2020. (9/19/2019)
- Announced Mercy Care will waive timeliness requirements for crisis claims with dates of services from 10/1/2018-3/31/2019, including H2011-HT, H2011, S9484, S9485 and T1016. The waiver applies to claims that have and have not been submitted, and is effective through 10/31/2019. Mercy Care is adjusting previously denied claims that meet the waiver criteria. (9/12/2019)
- Announced the availability of Synagis (palivizumab) injections to prevent respiratory syncytial virus. (9/10/2019)
- Released a Provider Vaccine Booklet that provides guidance regarding vaccinations. (9/6/2019)
- Provided a reminder regarding the AHCCCS Quality Management System Web Portal Application and requirements related to incident/accident/death reporting. (8/26/2019)
- Solicited feedback regarding EMR functionality supporting new AHCCCS billing requirements that goes into effect on 1/1/2020, for AHCCCS provider types 77, IC and 05. The new requirements apply to rendering provider information for professional practitioners. (8/14/2019)
- Posted information regarding AzAHP credentialing forms. (8/12/2019)
- Released guidance for monitoring parameters for behavioral health medications. (8/8/2019)
- Released guidance on Behavioral Health Intake Medical Record Audits for contract year 2020. (8/8/2019)
- Provided guidance on interpretation services provided during physician office visits. (8/8/2019)
- Announced the August Prescription for Change Opioid Conference. (8/8/2019)
- Released reference materials and guidance regarding billing Care Management (T1016), including examples of service documentation. (8/6/2019)
- Shared an AHCCCS provider communication regarding the ASAM Continuum® Tool, and information regarding September trainings. (8/5/2019)
- Clarified billing for allergy services and proper use of applicable codes. (8/2/2019)
- Announced enhancements to Mercy Care's post-payment review through Cotiviti Corporation, and requested providers cooperate with requests for information from Cotiviti. (7/23/2019)
- Released updates to J-code prior authorization requirements effective 8/19/2019. (7/18/2019)
- Announced new reference materials are available for Behavioral Health Residential Facility requirements and Home Visit resources. (7/11/2019)

Steward Health Care Network:

- Announced updates to prior authorization requirements effective 10/1/2019. The updates removed prior authorization for bariatric consultation and follow up visits, and some chiropractic and podiatry services. (9/1/2019)
- Shared an AHCCCS request for Personal Care and Home Health Service Providers to complete a survey by 9/30/2019, on readiness activities to comply with electronic visit verification requirements that go into effect in 2020. (8/8/2019).
- Announced the Steward Health Choice Q3 All Provider Forum. (7/2019)
- Provided a notice of a change in the paper claims mailing address, that became effective 8/15/2019 and reminder that electronic submission is the recommended method. (7/15/2019)

United Healthcare:

- Provided updated information regarding checking member eligibility, laboratory services, billing correct member ID numbers, and updated LanguageLine contract information. (10/7/2019)
- Provided information on how United Healthcare will adjust claims for CPT Code 92507 (speech, language, communication and/or auditory processing disorder) based on an AHCCCS enhanced fee schedule rate. (9/26/2019)
- Provided guidance regarding new AHCCCS billing requirements that will go into effect on 1/1/2020, and will require AHCCCS provider types 77, IC and 05 to include certain rendering provider information on claims. (9/23/2019)
- Provided information regarding claims system updates that impact evaluation and management services performed during global obstetrical care. (9/20/2019)
- Shared a DUR Educational Newsletter that contains information regarding opioid and buprenorphine use for treating opioid use disorder. (8/16/2019)
- Announced in-person Provider Information Expos on 9/24/2019 in Phoenix and 10/10/2019 in Tucson. (8/16/2019)
- Shared a United Healthcare Community Plan Service Area Map, showing which programs are served in each area of the state. (8/13/2019)
- Announced United Healthcare Provider Forums that occurred in August and September, with one additional WebEx scheduled on 11/6/2019. (8/5/2019)
- Provided guidance regarding including ordering, referring or supervising care provider information on claims. (7/29/2019)
- Shared information regarding provider access to IVR and Online Self-Service tools. (7/16/2019)

"FasPsych has worked with Crestline on many occasions. Most recently they prepared an RFP response for a Collaborative Care Model implementation. FasPsych not only won the award but was notified that the board's decision was unanimous. The Crestline team has a superior understanding of the healthcare industry and has the ability articulate this into value based solutions across a diverse group of organizations."

- Abraham Barton
President/CEO, FasPsych, LLC