

# **Cenpatico Integrated Care Provider Manual Summary of Changes for January 1, 2018 Edition**

o Acronyms will be spelled out throughout the Provider Manual

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No changes this month.

## **SECTION 1 – INTRODUCTION TO CENPATICO INTEGRATED CARE**

No changes this month.

## **SECTION 2 – COVERED SERVICES AND RELATED PROGRAM REQUIREMENTS**

No changes this month.

## **SECTION 3 – BEHAVIORAL HEALTH NETWORK PROVIDER SERVICE DELIVERY REQUIREMENT**

- 3.11.4 Notification Requirements to the Office of Human Rights
- 3.11.10 Transfer of a Special Assistance Member (New Section)
- 3.15.4 Communication and Language Assistance
- 3.15.7 Translation of Written Materials

## **SECTION 4 – BEHAVIORAL HEALTH PROVIDER COORDINATION OF CARE REQUIREMENTS**

No changes this month.

## **SECTION 5 – PHYSICAL HEALTH PROVIDER REQUIREMENTS**

No Changes this month.

## **SECTION 6 – SPECIFIC BEHAVIORAL HEALTH PROGRAM REQUIREMENTS**

No changes this month.

## **SECTION 7 – CREDENTIALING AND RE-CREDENTIALING REQUIREMENTS**

No changes this month.

## **SECTION 8 – FINANCE/BILLING**

No changes this month.

## **SECTION 9 – QUALITY MANAGEMENT REQUIREMENTS**

No changes this month.

## **SECTION 10 – MEDICAL MANAGEMENT/UTILIZATION MANAGEMENT REQUIREMENTS**

No changes this month.

## **SECTION 11 – TRAINING AND PEER SUPPORT SUPERVISION REQUIREMENTS**

No changes this month.

## **SECTION 12 – COMPLIANCE**

No changes this month.

## **SECTION 13 – DATA SYSTEMS/REPORTING REQUIREMENT**

No changes this month.

## **SECTION 14 – CENPATICO INTEGRATED CARE MEMBER HANDBOOK**

No changes this month.

## **SECTION 15 – GRIEVANCE AND APPEAL SYSTEM**

No changes this month.

## **SECTION 16 – DELIVERABLES**

### *Updated Deliverable Requirements:*

- ND-601 Staff Listing Form (changes to required providers)
- RE-1020 Language Proficiency Inventory (change in due date)

### *New Deliverables:*

- None

### *Terminated Deliverables:*

- ND-602 Staff Listing Attestation
- RF-1012 AzSH Progress Report

## **SECTION 17 – REFERENCES**

No changes this month.

## **SECTION 18 – PROVIDER MANUAL FORMS & ATTACHMENTS**

### **18.1 Forms**

PMF 3.11.1 Notification of Member in Need of Special Assistance (Revision Date 1/1/2018)

PMF 10.11.1 Medication Prior Authorization Request (Revision Date 1/1/2018)

PMF 10.11.2 Specialty Medication Prior Authorization Request (Revision Date 1/1/2018)

PMF 10.11.3 Exclusive Pharmacy Prescriber Request (Revision Date 1/1/2018)

PMF 10.11.4 Makena PA Request-Prescription Form (Revision Date 1/1/2018)

PMF 10.11.5 Long Acting Opioid Prior Authorization Form (Revision Date 1/1/2018)

### **18.2 Attachments**

PMA 10.11.1 Comprehensive Drug List by Drug Name (Revision Date 1/1/2018)

PMA 10.11.2 Comprehensive Drug List by Class (Revision Date 1/1/2018)

PMA 10.11.3 Behavioral Health Drug List by Drug Name (Revision Date 1/1/2018)

PMA 10.11.4 Behavioral Health Drug List by Drug Class (Revision Date 1/1/2018)

PMA 10.11.5 Pima & Yuma County Crisis Medication List (Revision Date 1/1/2018)

PMA 10.11.7 ADHD Medications for Use in Children Under 6 Years Old (Revision Date 1/1/2018)

PMA 10.11.8 Antipsychotic Medications in Children Under 6 Years Old (Revision Date 1/1/2018)

PMA 10.11.9 Buprenorphine Prior Authorization Criteria (Revision Date 1/1/2018)

PMA 10.11.11 Concomitant Antidepressant Treatment (Revision Date 1/1/2018)

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PMA 10.11.13 Quantity Limits/Supply Limits (Revision Date 1/1/2018)

PMA 10.11.14 Long Acting Injectables Antipsychotics (Revision Date 1/1/2018)

PMA 10.11.15 Rexulti (Revision Date 1/1/2018)

PMA 10.11.16 Belsomra (Revision Date 1/1/2018)

PMA 10.11.17 Seroquel XR (Revision Date 1/1/2018)

PMA 10.11.18 Fanapt (Revision Date 1/1/2018)

PMA 10.11.19 Invega (Revision Date 1/1/2018)

PMA 10.11.20 Trintellix (Revision Date 1/1/2018)

PMA 10.11.21 Lyrica (Revision Date 1/1/2018)

PMA 10.11.22 Vraylar (Revision Date 1/1/2018)

## **SECTION 19 – DEFINITIONS & ACRONYMS**

No changes this month.

