

**PROVIDER MANUAL
SUMMARY OF CHANGES BY SECTION
DECEMBER 1, 2015 EDITION**

Section 1 - Introduction to Cenpatico Integrated Care

- 1.1 Overview of the Arizona Public Health System
- 1.2 Provider Manual
- 1.3 Provider Services
- 1.4 Joining the Cenpatico Provider Network
- 1.5 Cenpatico Organizational Structure 14

Section 2 - Covered Services and Related Program Requirements

- 2.1 Covered Behavioral Health Services Based on Eligibility
- 2.2 Covered Physical Health Services for Title XIX/XXI Adults with SMI
- 2.3 Maternity Services for Title XIX/XXI Adults with SMI
- 2.4 Family Planning for Title XIX/XXI Adults with SMI
- 2.5 Dental Services for Title XIX/XXI Adults with SMI
- 2.6 Optical Services for Title XIX/XXI Adults with SMI
- 2.7 Vaccines for Children's Program and the Arizona State Immunization information system (ASIIS)
- 2.8 EPSDT for Adults with SMI 18, 19 & 20 Years of Age 39
- 2.9 Crisis Intervention Services
- 2.10 Housing for ADULTS With A Serious Mental Illness

Section 3 - Behavioral Health Network Provider Service Delivery Requirements

- 3.1 Eligibility Screening For AHCCCS Health Insurance, Medicare Part D Prescription Drug Coverage, and the Low Income Subsidy Program
- 3.2 Appointment Standards and Timeliness of Service
- 3.3 Referral and Intake Process

3.3.12 Specialty Behavioral Health Agency Referrals

Forms 3.3.2 and 3.3.3 were added

New bullet point added in last paragraph related to CFT/ART Meetings

- 3.4 Outreach, Engagement, Re-Engagement, and Ending an Episode of Care and Disenrollment
- 3.5 Assessment and Service Planning
- 3.6 SMI Eligibility Determination
- 3.7 General and Informed Consent to Treatment
- 3.8 Psychotropic Medication: Prescribing and Monitoring
- 3.9 Pre-Petition Screening, Court-Ordered Evaluation, and Court-Ordered Treatment

3.9.4. Court-Ordered Treatment Following Civil Proceedings Under A.R.S. Title 36

Paragraph entitled Judicial Reviews A.R.S. 36-546

Entire section has been replaced in its entirety

- 3.10 Special Populations 123
- 3.11 Special Assistance for Persons Determined to Have a Serious Mental Illness 132
- 3.12 Arizona State Hospital
- 3.13 Out-of-State Placements for Children and Young Adults

- 3.14 Discharge Planning 146
- 3.15 Cultural Competence
- 3.16 Business Continuity/ Recovery Plan and Emergency Response/ Pandemic Plan / Heat Plan Requirements
- 3.17 Intake and Coordination of Care Agency (ICC Agency) Requirements

3.17.8.5 Substances Use Services

Paragraph Medication Assisted Treatment (MAT)
Provider Manual Reference Section cited

- 3.18 Laboratory Provider Requirements
- 3.19 Specialty Provider Requirements 193

3.19.1.5 SUD Treatment Services

Paragraph revised in its entirety

Section 4 - Behavioral Health Provider Coordination of Care Requirements

- 4.1 Transition of Persons
- 4.2 Inter-RBHA Coordination of CARE
- 4.3 Coordination of Care with AHCCCS Health Plans, Primary Care Providers and Medicare Providers
- 4.4 Coordination of Care with Other Governmental Entities

4.4.6 Courts and Corrections

Added additional language to final paragraph bullet point regarding a form reference

4.4.7 Arizona County Jails

Added additional language to third from last bullet point regarding form reference

- 4.5 Partnerships with Families and Family-Run Organizations in the Children's Behavioral Health System

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- 5.1 Primary Care Provider (PCP) Requirements

Section 6 - Specific Behavioral Health Program Requirements

- 6.1 24 Hour Mobile Urgent Intake Program Requirements
- 6.2 72 Hour Children's Rapid Response Program Requirements
- 6.3 Assessment And Intervention Center Program Requirements
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- 6.10 Crisis Stabilization/Crisis Living Room Provider Program Requirements
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- 6.13 Program Requirements for Providers of Home Care Training to Home Care Client (HCTC) Services to Children
- 6.14 Program Requirements for Providers of IV Drug and Opioid Treatment Services
- 6.15 Program Requirements for Providers of Services to Adolescents Who Act Out Sexually
- 6.16 Program Requirements for Providers of Services to Adults Who Act Out Sexually
- 6.17 Substance Abuse Transitional Facility Program Requirements
- 6.18 Community Observation Centers

Section 7 - Credentialing and Re-Credentialing Requirement

- 7.1 Introduction and Processes

Section 8 - Finance/Billing

- 8.1 Submitting Claims and Encounters to Cenpatico INTEGRATED CARE
- 8.2 Copayments
- 8.3 Third Party Liability and Coordination of Benefits

Section 9 - Quality Management Requirements

- 9.1 Advance Directives
- 9.2 Medical Record Standards

9.2.4.3 Behavioral Health Records Including Records for GMH/SA and Integrated Health Financial Documentation Paragraph

Two new bullets added, review in entirety

- 9.3 Member Surveys
- 9.4 Performance Improvement Projects
- 9.5 Evidenced Based Practices and Practice Protocols
- 9.6 Peer Review
- 9.7 Quality of Care Concerns
- 9.8 Medical Institution Reporting of Medicare Part D
- 9.9 Seclusion and Restraint Reporting 340
- 9.10 Reporting of Incidents, Accidents and Deaths
- 9.11 ICC Agency Quality Management Plan Requirements

9.11 ICC Agency Quality Management Plan Requirements

9.11.2 Minimum Performance Standard

Entire section has changed for Integrated and Non-Integrated standards – review in its entirety.

Section 10 - Medical Management/Utilization Management Requirements

- 10.1 Securing Services and Prior Authorization/Retrospective Authorization
- 10.2 Technology
- 10.3 Concurrent Review for Hospitals 362

Last sentence of last paragraph deleted related to policy reference

- 10.4 Retrospective Review 363
- 10.5 Pre-Admission Screening and Resident Review
- 10.6 Inter-Rater Reliability Testing
- 10.7 Care Management and Care Coordination Services
- 10.8 Disease Management
- 10.9 Special Assistance Requirements
- 10.10 Out-of-Home Services Requirements
- 10.11 Pharmaceutical Requirements
- 10.12 Utilization Data Analysis and Data Management

Section 11 - Training and Peer Support Supervision Requirements

- 11.1 Training Requirements 382
- 11.2 Peer Support/Recovery Support Training, Certification and Supervision Requirements

Section 12 – Compliance

- 12.1 Member Rights
- 12.2 Verification of U.S. Citizenship or Lawful Presence for Public Behavioral Health Benefits
- 12.3 Reporting Discovered Violations of Immigration Status
- 12.4 Duty to Report Abuse, Neglect or Exploitation
- 12.5 Duty to Warn
- 12.6 Confidentiality
- 12.7 Fraud and Program Abuse Reporting
- 12.8 Provider Corporate Compliance Program
- 12.9 Encounter Validation Studies
- 12.10 Provider Reporting of Moral Or Religious Objection

Section 13 - Data Systems/Reporting Requirements

- 13.1 Enrollment, Disenrollment and Other Data Submission

Section 14 - Cenpatico Integrated care Member Handbook

- 14.1 General
- 14.2 Distribution
- 14.3 Cenpatico Integrated Care Member Handbook Review

Section 15 - Disputes, Grievance System and Member Rights

- 15.1 Notice Requirements and Appeal Process for Title XIX/XXI Eligible Persons
- 15.2 Complaint Resolution
- 15.3 Notice and Appeal Requirements (SMI and Non-SMI/Non-Title XIX)
- 15.4 Conduct of Investigations Concerning Persons with Serious Mental Illness
- 15.5 Provider Claims Disputes

Section 16 - Deliverable Requirements

Deliverable FN-407 OMB A-133 Audit – New Deliverable Added

Deliverable OI-201 Child Dedicated Recovery Coach Inventory – Updated to require a specific form to be used for reporting

Deliverable OI-220 Monthly Advisory Board Meeting Minutes - Deleted in its entirety

Deliverable OI-235 VR Referral Tracker – New Deliverable Added

Section 17 – References

- 17.1 Statutory And Regulatory References
- 17.2 Reference Documents

Section 18 - Provider Manual Forms & Attachments

Forms and Attachments have been divided into two separate categories

Attachments:

Updated:

- 10.1.2** Authorization Criteria for BHF-RTC Services

New:
4.3.1 AHCCCS Contracted Health Plans-Behavioral Health Coordinators

Forms:

Updated:

3.8.1 (English and Spanish) Informed Consent for Psychotropic Medication Treatment
3.9.10 Judicial Review-Right to Speak to Legal Counsel
10.1.1 Certification of Need (CON)
10.1.2 Recertification of Need (RON)
10.1.3 Notice of Admission to AIC-BIP-PP SUD BHRF
10.1.4 Request for OON Outpatient Services

New:

3.3.2 Specialty Provider Referral Checklist
3.3.3 Specialty Provider Monthly Summary
4.4.6 Auth for Use or Disclosure of Protected Health Info-Criminal Justice System Referral
9.11.1 Integration Performance Measures Outreach Monitoring Tool
10.1.7 Request for OOH Admission-Child
10.1.8 OOH Concurrent Review
10.1.9 OOH Discharge Plan
10.1.11 Request for Expedited Authorization

Section 19 - Definitions & Acronyms

19.1 Definitions
19.2 Acronyms