PROVIDER NEWSLETTER



August 2018

WHAT'S NEW!

AHCCCS Complete Care Coming October 1, 2018



On October 1st, 2018 Integration is going live! So what is Integration and who is affected?

Integration is also known as AHCCCS Complete Care (ACC). This new integrated system will join physical and behavioral health services together to treat all aspects of our members' health care needs. Integration seeks to simplify the payor source, while simultaneously coordinating care for both physical and behavioral health services. One plan, one payor.

Previously members had one insurance payor for physical health services (medical) = Health Choice Arizona and a completely separate insurance payor for their behavioral health services = Health Choice Integrated Care.

Come October 1st, 2018 most members will no longer have separate payor sources

for their physical and behavioral health services. This means that providers will no longer have to navigate two separate networks for their AHCCCS member's medical and behavioral health services.

A member will have all of their providers listed under one network, which will be managed and paid for by their single health care plan = **Steward Health Choice Arizona**

Integration will affect most AHCCCS members, however the following members will not transition to an integrated health plan:

- ALTCS members (EPD and DES/DDD), since ALTCS is already an integrated health plan;
- Foster care children receiving services through Comprehensive Medical Dental Program (CMDP); and
- Adults with Serious Mental Illness (SMI) designation.

WHERE DO I SUBMIT CLAIMS?

All ACC and Regional Behavioral Health Authority (RBHA) claims will now be submitted to our Electronic Payor ID: 62179, or mail claims to:

Steward Health Choice Arizona ATTN: Claims Department 410 N. 44th St., Ste. 500 Phoenix, AZ 85008

We want you to feel ready for this transition. Here are some items that we will be mailing to members:

- Members will receive enrollment materials from Steward Health Choice Arizona.
- Members will also receive their welcome kit which includes their primary care doctor information. If the member's primary care doctor is not in our network, they will be autoassigned to doctors in the Steward Health Choice Arizona network based on their home zip code.

WE'RE HERE TO HELP!

To help you and your staff stay informed and help address any questions about Steward Health Choice Arizona, we have established the following support services:

- A Member Services call center
 - 1-800-322-8670
 - Open Monday-Friday 6:00AM-6:00PM
 - Or email your questions to comments@ healthchoiceaz.com
- Integrated SHC-AZ website http://www. stewardhealthchoiceaz.com/ which will be updated to inform members on:
 - Health plan benefits
 - Providers in network
 - FAQs
 - Programs and information from SHC-AZ

If you have any questions, please contact your local Provider Performance Representative.

To better serve our providers, during the first week of ACC Transition, October 1st – 5th, Network service Provider Performance Representatives will be available from 7am – 7pm.

STAY INFORMED ABOUT ACC/STEWARD HEALTH CHOICE ARIZONA

Steward Health Choice Arizona has created a listserv to communicate updates on recent developments, timelines, and frequently asked questions (FAQ's) related to the transition process.

Steward Health Choice Arizona encourages anyone who is interested in this transition to sign up to receive communication updates.

To subscribe go to the website http://www.healthchoiceaz.com/news-center/acctransition-updates/and follow the instructions under "Stay Informed".

DID YOU KNOW?

Appointment Availability Standards change with ACC effective October 1st, 2018

For Primary Care Provider Appointments:

- a. Urgent Care Appointments as expeditiously as the member's health condition requires but no later than two (2) business days of request, and
- b. Routine Care Appointments within 21 calendar days of request.

For Specialty Provider Appointments, including Dental Specialty:

- a. Urgent Care Appointments as expeditiously as the member's health condition requires, but no later than two (2) business days from the request, and
- b. Routine Care Appointments within 45 calendar days of referral.

For Dental Provider Appointments:

- a. Urgent Appointments as expeditiously as the member's health condition requires, but no later than three (3) business days of request, and
- b. Routine Care Appointments within 45 calendar days of request.

For Maternity Care Provider Appointments, initial prenatal care appointments for enrolled pregnant members shall be provided as follows:

- a. First trimester within 14 calendar days of request,
- b. Second trimester within 7 calendar days of request,
- c. Third trimester within 3 business days of request, and
- d. High risk pregnancies as expeditiously as the member's health condition requires and no later than three (3) business days of identification of high risk by Steward Health Choice Arizona or maternity care provider, or immediately if an emergency exists.

For Behavioral Health Provider Appointments:

- a. Urgent Need Appointments as expeditiously as the member's health condition requires but no later than 24 hours from identification of need,
- b. Routine Care Appointments:
 - i. Initial assessment within 7 calendar days of referral or request for service.
 - ii. The first behavioral health service following the initial assessment as expeditiously as the member's health condition requires but no later than 23 calendar days after the initial assessment, and
 - iii. All subsequent behavioral health services, as expeditiously as the member's health condition requires but no later than 45 calendar days from identification of need.

For Psychotropic Medications:

- a. Assess the urgency of the need immediately, and
- b. Provide an appointment, if clinically indicated, with a Behavioral Health Medical Professional within a timeframe that ensures the member
 - i. Does not run out of needed medications, or
 - ii. Does not decline in his/her behavioral health condition prior to starting medication, but no later than 30 calendar days from the identification of need.

Additional reference please see ACOM 417 https://www.azahcccs.gov/shared/Downloads/ACOM/NotEffective/400/417.pdf

Stillbirth Documentation Requirements

When submitting the required stillbirth notification, please ensure the following key data elements are documented:

a. Attained weight of at least 600 grams

b. Gestational age of 24 weeks, verified by prenatal records including an Estimated Date of Confinement (EDC). An ultrasound report may also be used to verify EDC, if completed prior to 20 weeks gestation or a Ballard Assessment, done at delivery by a nurse and/or physician to determine physical maturity of the infant, confirming a gestational age of at least 24 weeks.

Most importantly documentation of the infant weight, gestational age, date and time of delivery and APGAR scores are required.

AHCCCS Differential Adjusted Payment Decisions

AHCCCS has provided the following Differential Adjusted Payment decisions:

For the contracting year October 1, 2018 through September 30, 2019 (CYE 2019), select AHCCCS-registered Arizona providers which meet agency established performance criteria will receive Differential Adjusted Payments (DAP). The AHCCCS Administration is implementing these DAP rates to assure that payments are consistent with efficiency, economy, and quality of care and are sufficient to enlist enough providers so that care and services are available at least to the extent that such care and services are available to the general population in the geographic area.

AHCCCS will implement DAP rates for the following providers*:

- Hospitals Subject to APR-DRG Reimbursement
- Other Hospitals and Inpatient Facilities
- Nursing Facilities
- Integrated Clinics
- Physicians, Physician Assistants, and Registered Nurse Practitioners

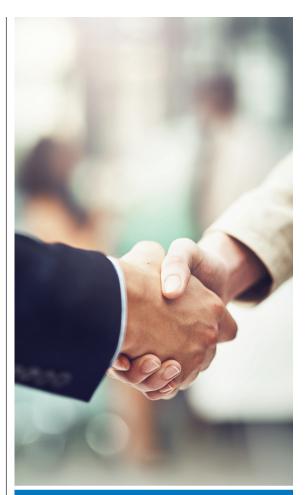
DAP rates for the following providers are deferred for consideration to October 1, 2019 through September 30, 2020.

- Hospitals Subject to APR-DRG Reimbursement relative to entering into a care coordination agreement
- Behavioral Health Outpatient Clinics

The DAP rates currently in place expire after September 30, 2018 dates of service.

Please refer to AHCCCS Final Notice at https://www.azahcccs.gov/AHCCCS/Downloads/PublicNotices/rates/DifferentialAdjustedPaymentDAP_20181001.pdf

*IHS and 638 tribally owned and/or operated facilities are exempt from this initiative based on payments primarily at the federally-mandated all-inclusive rate.



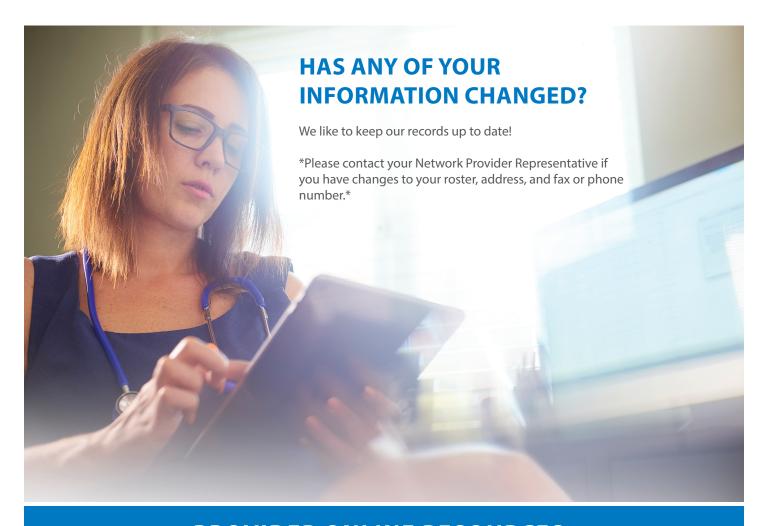
MEET THE CEO!



Are you a CEO in our Provider Network?

If so, please join Shawn Nau, CEO of Steward Health Choice Arizona, in our Provider CEO Meeting Series.

Please RSVP to Jane Scholes at Jane. Scholes @steward.org for additional details.



PROVIDER ONLINE RESOURCES

Our team brings an open vision to Arizona. We believe that those who provide care should be the leaders in creating and constructing new, better and less invasive mechanisms for the delivery of the care they provide. We are provider-owned and we understand both the rewards and difficulties of managed care and health plan/provider relationships.

Visit us online for provider specific resources! Provider Manual(s) Prior Authorization Provider Notices

HCA: http://www.healthchoiceaz.com/providers/overview/

HCG: http://www.hcgenerations.com/providers/provider-information

HCIC: http://www.healthchoiceintegratedcare.com/providers/provider-resources/

Provider Portal - Get direct access to member eligibility, claims status, PA status and more! https://www.healthchoicearizona.com/ProviderPortal/login/

News Center/ACC Transition: http://www.healthchoiceaz.com/news-center/acc-transition-updates/





