Federal Emergency Services Program (FESP)
Dialysis Services

Provider Training Team

June 2021

AHCCCS
Arizona Health Care Cost Containment System

About this Presentation

The course is designed for the Federal Emergency Services Program only and will cover Dialysis Certification Requirements, Extended Service Authorizations and Emergency Indicator Requirements for Outpatient Dialysis claims and services.

If you have any questions about this presentation, please email the provider training team at: providertrainingffs@azahcccs.gov

What is the FES Program?

What is FES?

AHCCCS provides emergency health care services through the Federal Emergency Services Program for qualified and nonqualified aliens, as specified in 8 USC 1611 et seq. who meet all requirements for Title XIX eligibility as specified in the State Plan except for citizenship.

FES only covers emergency services that fully meet the Federal Definition of an "emergency service".

What is the Federal Definition of an Emergency Condition?

Emergency Medical or Behavioral Health Condition for a FESP Member

The sudden onset of a medical condition (including labor and delivery) or a behavioral health condition manifesting itself by acute symptoms of sufficient severity, including severe pain, such that the absence of immediate medical attention could reasonably be expected to result in:

1. Placing the member's health in serious jeopardy (this includes serious harm to self for purposes of behavioral health).
2. Serious impairment to bodily functions.
3. Serious dysfunction of any bodily organ or part.
4. Serious physical harm to another person (for behavioral health condition).

What is NOT an Emergency Condition?

Emergency Medical or Behavioral Health Condition for a FESP Member

Note, that a condition manifesting itself by only Chronic symptoms is **NOT** an Emergency Medical or Behavioral Health Condition, even though the absence of medical care might lead to one of the adverse consequences listed in the definition of Emergency Medical or Behavioral Health Condition.

What is the FES Program?

Who Qualifies for Enrollment in the FES Program?

Members that are eligible to be enrolled in the FES program are Arizona residents, who are qualified and nonqualified aliens as specified in 8 USC 1611 et seq., who meet all requirements for Title XIX (Medicaid) eligibility as specified in the Arizona State Plan except for citizenship.

FES Dialysis Services and What You Need to Know

Outpatient Dialysis Services

Outpatient dialysis services are eligible for reimbursement under the FES Program for members that have End Stage Renal Disease (ESRD).

- The criteria specified in A.A.C. R9-22- 217(B) and Section B of AMPM 1100, Federal Emergency Services Program must be satisfied.

An Extended Service Authorization is also required and will be issued by the AHCCCS/Utilization Management department upon approval.

- Required forms must be completed, signed by the treating physician and submitted to AHCCCS/DFSM. These are (1) Initial Dialysis Case Creation Form , and (2) the Monthly Certification of Emergency Medical Condition.
  - o Note: The Monthly Certification form must be completed on a monthly basis.

Why are these forms Required for FES Outpatient Dialysis Services?

Outpatient Dialysis Services

The Initial Dialysis Case Creation and Monthly Certification forms are used to certify that, in the treating physician's opinion, in the absence of receiving dialysis treatment at least three times per week would reasonably be expected to result in any one of the following:

a) Placing the member's health in serious jeopardy
b) Serious impairment of bodily function
c) Serious dysfunction of a bodily organ or part

Note: Dialysis services will be subject to medical review and post-payment review.

The certification forms can be found in the AMPM:

- Initial Dialysis Case Creation Form:
  https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/1100/1100A.docx
- Monthly Certification Form:
  https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/1100/1100B.docx

Extended Service Authorizations

Extended Service Authorizations

The extended service authorization is the only type of authorization that will be issued for an FES member.

The Extended Service authorization is not the same as a prior authorization, but serves the same purpose in that it shows an approval for dialysis services for the member. It also includes the duration of services.

Monthly Certification

Monthly Certification

The dialysis services will continue to be covered on a monthly basis as long as the FES Program Member remains eligible and the treating physician:

a) Completes Attachment B ("Monthly Certification of Emergency Medical Condition"); and

b) Retains a completed and signed copy of Attachment B in the member's medical record for each month that services are provided.

NOTE: Although the treating physician is not required to submit Attachment B to AHCCCS monthly, he/she shall retain a copy of the completed form in the member's medical records. AHCCCS/DFSM may concurrently and/or retrospectively audit member medical records to ensure compliance with this monthly requirement.

Forms Needed for FES

Form Locations

AMPM 1100, Attachment A ("Initial Dialysis Case Creation Form" and Attachment B ("Monthly Certification of Emergency Medical Condition") can be found in the AHCCCS Medical Policy Manual (AMPM).

- Initial Dialysis Case Creation Form:
  https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/1100/1100A.docx
- Monthly Certification Form:
  https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/1100/1100B.docx

Chapter 1100, Federal Emergency Services (FES) Program

- 1100, Federal Emergency Services Program Overview
  - Attachment A, Initial Dialysis Case Creation Form
  - Attachment B, Monthly Certification of Emergency Medical Condition

FES and Completing the Claim Forms

Claim Form Requirements

AHCCCS FFS program requires all claims for services provided to a FESP member to be submitted to AHCCCS with the appropriate "emergency indicator" codes marked on each claim submission. Marking the claim "urgent" is not sufficient.

CMS 1500 Claim Form: For services billed on the CMS 1500 (professional) claim form, the EMG indicator field (24C) must be marked "Y". Paper submissions must include a "Y" in the EMG indicator field 24C. EDI submissions must be marked "emergent".

UB-04 Claim Form: For services billed on the UB-04 (institutional) claim form, the "Type of Admission" field (14) must be entered with admit type code "1" to indicate "Emergency" visit.   EDI submissions must be marked "emergent". Urgent "2" is not sufficient.

Claim Forms and Emergency Indicators

Claim Form Requirements

CMS 1500 Claim Form

UB-04 Claim Form

Federal Emergency Services Program (FESP)

Additional Resources

To view additional information, refer to the AHCCCS Fee-for-Service Provider Billing Manual and to the AHCCC Medical Policy Manual by clicking on the links below.

Chapter 8, Prior Authorizations	Chapter 10, Individual Practitioner Services
Chapter 15, Dialysis Services	Chapter 18, Federal Emergency Services
Chapter 19, Behavioral Health Services	AMPM Chapter 1100, FES Program Overview
AMPM 310 K - Hospital Inpatient Services	

DFSM Provider Education and Training Unit

DFSM Provider Training

The DFSM Provider Education and Training Unit can assist providers with the following:

- How to submit and status claims or prior authorization requests through the AHCCCS Online Provider Portal (FFS programs, including AIHP, TRBHAs and Tribal ALTCS).

- Submission of documentation using the Transaction Insight Portal (i.e. the AHCCCS Daily Trip report, requested medical records, etc.).

Additionally, the DFSM Provider Training unit offers trainings with informational updates to program changes, system updates, and changes to the AHCCCS policy, AHCCCS guides and manuals.

Education and Training Questions?

The DFSM Provider Education and Training Unit does not instruct providers on how to code or bill for a particular service.

For additional information on rates and coding please follow the below guidelines:

- Rates - Questions on AHCCCS FFS rates should be directed to the rates team at FFSRates@azahcccs.gov
- Coding - Questions on AHCCCS Coding should be directed to the coding team at CodingPolicyQuestions@azahcccs.gov
    - NOTE: The Coding team cannot instruct providers on how to code or bill for a particular service. Those questions should be directed to the provider's professional coder/biller.
- ACC Plan Claims - Questions regarding the submission of claims to an AHCCCS Complete Care (ACC) Health Plan should be directed to the appropriate ACC Health Plan.

The DFSM Provider Training Team can be reached at   ProviderTrainingFFS@azahcccs.gov

Technical Questions?

For technical assistance with the AHCCCS Online Provider Portal, please call:

- AHCCCS ISD Customer Support Desk at 602-417-4451 or
  ISDCustomerSupport@azahcccs.gov

Claims Questions?

For claims questions that cannot be resolved on the portal, please outreach the Claims Customer Service team at:

- Phone: (602) 417-7670 – Select Option 4
- From: Monday – Friday from 7:30am – 4:00pm (Phoenix Time).

The Claims Customer Service team can assist with the following items:

- Details regarding a claim status that cannot be answered on the AHCCCS Online Provider Portal;
- Providing denial codes and general information regarding denied claims; and
- Providing general information about approved and pended claims.

NOTE: Providers should not call the Claims Customer Service team if they have questions on rates, CPT/HCPCS codes and modifiers, billing questions, the address a check was mailed to, and payment details for approved claims.

Policy Information

AHCCCS FFS Provider Billing Manual:

- https://www.azahcccs.gov/PlansProviders/RatesAndBilling/FFS/providermanual.html

AHCCCS IHS/Tribal Provider Billing Manual:

- https://www.azahcccs.gov/PlansProviders/RatesAndBilling/ProviderManuals/IHStribalbillingManual.html

AHCCCS Medical Policy Manual

- https://www.azahcccs.gov/shared/MedicalPolicyManual/

Questions?

If you have questions regarding this presentation, please email
ProviderTrainingFFS@azahcccs.gov

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Thank You.