

# AHCCCS Prior Authorization (PA) and Concurrent Review (CR) Standards during COVID-19 Emergency for Fee-for-Service Health Programs

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This memo outlines the updated AHCCCS Prior Authorization and Concurrent Review Standards for AHCCCS Division of Fee-for-Service Management (DFSM) in response to Governor Ducey's declaration of a public health emergency for COVID-19 and is effective October 1, 2022. These changes impact members enrolled with a Fee-for-Service Program, including the American Indian Health Program (AIHP), Tribal Regional Behavioral Health Authorities (TRBHAs), Tribal Arizona Long Term Care Services (Tribal ALTCS), and Division of Developmental Disabilities Tribal Health Program (DDD THP).

These standards are subject to change as the emergency conditions evolve.

All services reimbursed must be medically necessary, cost-effective, federally and state reimbursable, and will be subject to post-payment review.

## I. Behavioral Health

A. Effective for dates of service on or after October 1, 2022, concurrent review prior authorization for Behavioral Health Inpatient Residential Treatment Center (RTC) will resume to a concurrent review frequency of every 30 days. Reviews for Behavioral Health Residential Facilities (BHRF) will continue at concurrent review intervals of up to 90 days.

B. Providers should continue to work with the TRBHA and outpatient treatment teams for ongoing care coordination and discharge planning needs.

## II. Dental Services

A. Dental prior authorization approvals will continue to be extended as medically appropriate.

### III. Pharmacy Services

#### A. Signature Requirements

42 CFR 456.705 states the following: The State must provide pharmacies with detailed information as to what they must do to comply with prospective DUR requirements, including guidelines on counseling, profiling, and documentation of prospective DUR activities by the pharmacists. The pharmacies, in turn, must provide this information to their pharmacists. This information is to be based on guidelines provided by this subpart and by other sources that the State may specify. Effective for dates of service on or after October 1, 2022 AHCCCS FFS will reinstate the requirement for the member signature at the pharmacy in order to confirm that counseling occurred and also that the medication was dispensed to the member.

### IV. Physical Health Services

#### A. COVID-19 Testing and Treatment Services

1. DFSM will not require prior authorization or concurrent review for services related to testing, diagnosis, and/or treatment of COVID-19.
2. DFSM will cover one at-home COVID-19 testing kit (two tests) filled at the pharmacy with a prescription per member per month.

#### B. Facility Services

1. Prior authorization and concurrent review requirements will be reinstated for the following levels of care. DFSM will reinstate prior authorization and concurrent review requirements for the following levels of care effective for dates of service on or after October 1, 2022:
  - Acute Inpatient hospitalization;
  - Skilled Nursing Facilities (NFs)
  - Assisted Living Facilities/Centers; and
  - Inpatient Rehabilitation Facilities (e.g., Long Term Acute Care Hospitals).
2. FFS Providers shall continue to coordinate care management activities to ensure FFS members have safe and effective transitions between levels of care.
3. Prior Authorization approvals for elective inpatient services will continue to be extended as medically appropriate.

## C. Outpatient Services

1. DFSM may extend outpatient service prior authorization approvals as medically appropriate.
2. For services related to the COVID-19 emergency, other than testing, diagnosis and treatment, the document submission period for Prior Authorization will no longer be extended to 90 days. COVID-19 testing, diagnosis and/or treatment are exempt from Prior Authorization. Please see IV A.

## V. Non-Emergency Medical Transportation (NEMT) Services

- A. NEMT providers transporting a member over 100 miles must obtain prior authorization.
- B. Effective for dates of service on or after July 1, 2022 AHCCCS NEMT drivers are required to collect a passenger's written or electronic signature on the FFS Trip Ticket.

## VI. Home Health Services and Durable Medical Equipment: Face-to-Face Requirement Change

- A. CFR § 440.70 requires that the initiation of home health services and medical equipment and supplies be subject to face-to-face encounter requirements for the FFS population.
- B. Pursuant to section 1135(b)(5) of the Social Security Act, effective for dates of service on or after October 1, 2022 AHCCCS will reinstate CMS requirements for completion of face-to-face encounters prior to the initiation of orders for home health services and durable medical equipment.

## VII. COVID-19 Frequently Asked Questions (FAQs)

We encourage everyone to check the [AHCCCS COVID-19 FAQs](#) for the latest guidance.