



# DDD Tribal Health Program

Program Changes Effective April 1, 2022

# What is the DDD Tribal Health Program (THP)?

The Arizona Department of Economic Security (DES) Division of Developmental Disabilities (DDD) Tribal Health Program (THP) is the health plan which administers fee for service physical health, behavioral health, and long- term care services and supports (LTSS) for DDD THP enrolled American Indian/Alaska Native members.

# DFSM/DDD THP Interagency Subcontract

Effective April 1, 2022 AHCCCS' Division of Fee-for-Service Management (DFSM) will manage acute physical and behavioral health service authorizations for enrolled DDD THP members via an inter-agency subcontract with the DDD THP.

- The DDD will retain full responsibility for:
  - Care coordination,
  - Case management functions for all DDD THP members, and
  - Authorization of LTSS.
- The DFSM/DDD THP subcontract will improve THP member access to care.

# American Indian/Alaska Native Options

AI/AN members who are eligible for both DDD and ALTCS have options for how they want to receive health care services:

Option	Physical Health Services	Behavioral Health Services	Children's Rehabilitative Services	Long Term Services and Supports	Support Coordination
1	DDD Health Plan	DDD Health Plan	DDD Health Plan	DDD ALTCS	DDD
2	DDD Health Plan	Tribal Regional Behavioral Health Authority (TRBHA)*	DDD Health Plan	DDD ALTCS	DDD
3	Tribal Health Program	Tribal Regional Behavioral Health Authority (TRBHA)*	Tribal Health Program	DDD ALTCS	DDD
4	Tribal Health Program	Tribal Health Program	Tribal Health Program	DDD ALTCS	DDD

# How Will This Change Impact FFS Providers?

To minimize the administrative burden on FFS providers the following can be submitted via the AHCCCS Provider Portal for dates of service April 1, 2022, and moving forward.

- Service authorizations for acute physical and behavioral health services for DDD THP members.
- Claims for acute (physical and behavioral health) services for DDD THP members.
- Providers must register to use the AHCCCS Provider Portal.

# How Will This Change Impact DDD THP Members?

- Members will continue to be eligible for all the same services and benefits.
- Members will continue to use the existing network of fee-for-service providers.
- Members should see improved access to care.

# What is NOT Changing?

- DDD is currently responsible for the assessment and oversight of Long Term Services and Supports through its Qualified Vendor Network. This will continue after April 1, 2022.
- DDD will continue providing Support Coordination (Case Management) for all DDD enrolled members.

# Where Can I Find Information If I Have Questions?

- DDD has published a website with information about this transition, <https://bit.ly/ddd-ffs>.
- Fee-for-Service providers are encouraged to sign-up to receive updates and information from the AHCCCS DFSSM using this link, <https://bit.ly/ahcccsdfsm>.



# How to Verify Member Enrollment in the DDD-THP Program

# How To Verify THP Enrollment Using The AHCCCS Online Provider Portal

- Sign on – AHCCCS Online Provider Portal
- Select Member Verification (menu tab)
- Best search option:
  - AHCCCS ID > Date of Birth > Date of Service  
A12345678      01/01/2022      04/05/2022
  - Select Search tab

# How To Verify THP Eligibility Using The AHCCCS Online Provider Portal

## Member Eligibility Verification: Recipient Search

### Recipient Search

\* indicates required fields

**Search For:**  RECIPIENT  NEWBORN

**Search By:**  AHCCCS ID and DOB  
 LAST NAME, DOB and SSN  
 AHCCCS ID, NAME and DOB  
 AHCCCS ID, LAST and FIRST NAME and DOB  
 LAST and FIRST NAME & DOB  
 LAST and FIRST NAME, DOB & SSN  
 LAST and FIRST NAME, DOB & MEDICARE CLAIM NUMBER

**Search Fields**

**AHCCCS ID:\***  (A12345678)

**Date of Birth:\***  (MM/DD/YYYY)

**Date of Services (DOS)**

**Begin Date:**

**End Date:**

•The verification will be pr  
•The Begin Date of Service  
•The End Date of Service  
•For hospital provider type  
range.  
•For all other provider typ  
Begin Date of Service to E

# How To Verify THP Enrollment Using The AHCCCS Online Provider Portal

- Bottom of the page will show the Health Plan ID description

## Member Eligibility Verification: Eligibility And Enrollment

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[Recipient Search](#) | [Eligibility And Enrollment](#) | [Third Party Liability](#) | [CoPayment](#) | [Medicare Benefits](#) | [Behavioral Health Services](#) | [Share of Cost](#) | [Additional Benefits](#) |

Medical Enrollment					
Health Plan ID/Description	Period Start	Period End	Rate Code	Contract Type	Insurance Type
110007 LTC DD DES	12/01/2017		2210 - SSI DISABLED NON-MEDICARE	J LTC/CAP	HM HEALTH MAINTENANCE ORGANIZATION (HMO)
<input type="checkbox"/> Service Type Codes					

# How To Verify BHS Enrollment

Click on the behavioral health services tab to view the BHS site information.

Member Eligibility Verification: Eligibility And Enrollment

[Print](#) | [Hel](#)

[Recipient Search](#) | [Eligibility And Enrollment](#) | [Third Party Liability](#) | [CoPayment](#) | [Medicare Benefits](#) | **[Behavioral Health Services](#)** | [Share of Cost](#) | **[Additional Benefits](#)**

If Site 62 DDD-SUB is listed, click on the “Additional Benefits” tab

Behavioral Health Services				
BHS Category	Begin Date	End Date	BHS Site	BHS Service Type
G GENERAL MENTAL HEALTH SERVICES	08/13/2021		62 DDD - SUB	CH MENTAL HEALTH FACILITY - OUTPATIENT

# How To Verify BHS Enrollment

- AI SUB – DDD Tribal Health Program is present – Physical and Behavioral claims must be submitted to AHCCCS FFS for processing.

DDD Subcontractor Plan		
DDD Plan	Begin Date	End Date
AI SUB - DDD TRIBAL HEALTH PROGRAM	04/01/2022	

## Training resources:

- [https://www.azahcccs.gov/Resources/Downloads/DFSMTraining/2020/FALL2020\\_MemberEligibilityAndVerification.pdf](https://www.azahcccs.gov/Resources/Downloads/DFSMTraining/2020/FALL2020_MemberEligibilityAndVerification.pdf)



# DFSM Prior Authorization Submission Process

# Submitting a Prior Authorization Request

There are three steps to take to submit a Prior Authorization (PA) request.



# How To Submit An FFS Prior Authorization Using The AHCCCS Online Provider Portal

- Sign on – AHCCCS Online Provider Portal
- Select Prior Authorization Submission (menu tab)
- Best search option:
  - AHCCCS ID > Date of Birth > Service Provider ID > Dates of Service  
A12345678      01/01/2022      (6 or 10 digit)      04/05/2022
  - Select Search tab

# How To Submit An FFS Prior Authorization Using The AHCCCS Online Provider Portal

## Prior Authorization Search

### PA Recipient/Case Search

\* Indicates a required field.

Search System:\* ACUTE ▾

Search By:\* AHCCCS ID ▾

AHCCCS ID:\* A12345678

Service Provider ID:\* XXXXXXXX ▾

Begin Date Of Service: 04/05/2022

End Date Of Service: 05/28/2022

Search

Clear

# How to Submit an FFS Prior Authorization

**Enter Event Information**

Case No:\* 000040122

Event Type:\* MEDICAL

Recipient AHCCCS ID:\* A12345678

Provider Contact Name:\* AHCCCS Clinic

Contact Phone Number:\* 602-602-0000

Requested Begin Date:\* 04/05/2022

Requested End Date:\* 04/05/2022

Admit Date:

Discharge Date:

Diagnosis Code:\* R68 . 89

Description: Surgery

Next Clear

**Enter Activity Information**

Case Number:\* 000040122

Provider Contact Name:\* AHCCCS Clinic

Contact Phone Number:\* 602-602-0000

Sequence Number:\* 01

Activity Type:\* HCPCS

Activity Code:\* 11000

Modifier:

Allowed Units:\* 2

Note:

Next Clear

Training resources:

- <https://www.azahcccs.gov/Resources/Downloads/DFSMTraining/2022/PriorAuthorizationSubmission.pdf>

# Prior Authorization is Completed

## ACTIVITY LIST COMPLETED

- The phrase “Transaction Succeeded” will appear indicating that a new activity list for the member was added.
- The Case number will appear under the Activity List.
- If you want to add additional activities to the same Event, you can add multiple activities by clicking the Activity tab.

**Prior authorization request is complete.**

# Dates of Services That Overlap The Member's Enrollment Dates

Prior Authorization: Requests that overlap the member's enrollment dates should be split and submitted to each plan for approval based on the date(s) of service.

Claim Submission: Dates of service that overlap the member's enrollment dates should be split and submitted to each plan for consideration.



# CMS 1500 Claim Submission Process

# Claim Submission

- Sign on – AHCCCS Online Provider Portal
- Select Claim Submission (menu tab), select the form type.
- AHCCCS claim submission fields are the same fields that are listed on the CMS 1500, UB-04 and ADA claim forms.
- Pros:
  - Claims crossover within 24 hours of submission.
  - Check claim status, no lag time, faster posting of payments.
- AHCCCS accepts, paper and EDI claim submissions.

# Additional Resources

- [Professional \(CMS 1500\) Claim Submission Using the AHCCCS Online Provider Portal](#)
- [Institutional \(UB-04\) Claim Submission Using the AHCCCS Online Provider Portal](#)
- [Dental \(ADA 2012\) Claim Submission Using the AHCCCS Online Provider Portal](#)

# Additional Resources

- [How to Use the AHCCCS Online Provider Portal to Verify Member Eligibility and Enrollment](#)
- [How to Register for an AHCCCS Online Provider Portal Account](#)
- [Transaction Insight Portal](#)

# Contact Information

The DFSSM Provider Training Team can be reached at:

[providertrainingffs@azahcccs.gov](mailto:providertrainingffs@azahcccs.gov)

Customer Service: 602-417-7670, option #4

Provider Enrollment: 602-417-7670, option #5

Prior Authorization: 602-417-4400

FFS Rates: [FFSRates@azahcccs.gov](mailto:FFSRates@azahcccs.gov)

AHCCCS ISD Customer Support Desk at 602-417-4451 or

[ISDCustomerSupport@azahcccs.gov](mailto:ISDCustomerSupport@azahcccs.gov)

Questions?

Thank You.