

310-F - EMERGENCY MEDICAL SERVICES

EFFECTIVE DATES: 10/01/94, 10/01/18, 06/04/24

APPROVAL DATES: 10/01/97, 10/01/01, 10/01/03, 10/01/06, 05/01/11, 08/05/18, 04/11/24

I. PURPOSE

This Policy applies to ACC, ACC-RBHA, ALTCS E/PD, DCS/CHP (CHP), and DES/DDD (DDD) Contractors; Fee-For-Service (FFS) Programs including: the American Indian Health Program (AIHP), Tribal ALTCS, TRBHA; and all FFS populations. As specified in A.A.C. R9-22-210, Federal Emergency Services (FES) is excluded from this Policy. For FES Program, refer to A.A.C. R9-22-217 and AMPM Chapter 1100 for covered emergency medical and behavioral health services for the FES Program. This Policy establishes requirements regarding emergency medical services, including physical and behavioral health.

II. DEFINITIONS

Refer to the [AHCCCS Contract and Policy Dictionary](#) for common terms found in this Policy including:

EMERGENCY CONDITION FOR NON-FES MEMBERS	FEDERAL EMERGENCY SERVICES (FES) PROGRAM MEMBER	FEE-FOR-SERVICE (FFS)
MEMBER	PRIOR AUTHORIZATION (PA)	TRIAGE/EMERGENCY MEDICAL SCREENING SERVICES FOR NON-FES MEMBERS

III. POLICY

As specified in A.A.C. R9-22-210, AHCCCS covers emergency medical services for managed care and FFS members who are not FES Program Members. Emergency medical services are provided for the treatment of an emergent physical or behavioral health condition.

Emergency medical services are covered for members when there is a demonstrated need, and/or after triage/emergency medical assessment services indicate an emergency condition. Triage/screening services must be reasonable, cost effective and meet the criteria for severity of illness and intensity of service.

A provider is not required to obtain Prior Authorization (PA) for emergency services. However, a provider shall comply with the notification, post-stabilization requirements, and emergency services, as specified in A.A.C. R9-22-210 that describe general provisions for responsible entities, payment and denial of payment, and notification requirements.

The Contractor, TRBHA, and Tribal ALTCS Case Manager, shall educate their members regarding the appropriate utilization of emergency room services. AIHP members receive education regarding emergency services via the AHCCCS Handbook for Members of the American Indian Health Program and/or the Tribal Regional Behavioral Health Authorities located on the AHCCCS website – American Indians – American Indian Health Program.

For non-emergency care needs that arise after provider regular office hours or on weekends, the Contractor, TRBHA, and Tribal ALTCS Case Manager should encourage members to utilize nurse triage lines, crisis lines and/or to obtain services from non-emergency facilities (e.g., urgent care centers) as appropriate.

Refer to AMPM Policy 530 regarding member transfers between facilities after an emergency hospitalization.

Refer to AMPM Policy 820 for additional information regarding emergency medical services for FFS members who are not in FES Program.