



## ~~500—CHAPTER OVERVIEW<sup>1</sup>~~

~~EFFECTIVE DATE: 10/01/1994~~

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~~INITIAL~~

~~EFFECTIVE DATE: 10/01/1994~~

### PURPOSE

~~This policy applies to Acute Care, ADHS/DBHS, ALTCS/EPD, CRS, DES/CMDP (CMDP), and DES/DDD, (DDD) and RBHA Contractors.~~

~~This Chapter addresses policies for coordination of AHCCCS covered health care services provided to AHCCCS members through Contractors and FFS providers programs including Tribal ALTCS, TRBHAs, and American Indian Health Program (AIHP), as delineated within policy. AIHP members are not required to have a PCP and do not require a referral to receive services.~~

~~Care coordination requirements include the following:~~

- ~~1. Primary care provider (PCP) roles, responsibilities, selection and assignment~~
- ~~2. Transition between Contractors, FFS, services and programs~~
  - ~~a. Children's Rehabilitative Services (CRS) Care Coordination~~
- ~~3. Member records and release of information protocol.~~

~~Note that AHCCCS requires Arizona Long Term Care System (ALTCS) members to have both a PCP for acute care services and a case manager for long term care services. Refer to AMPM Chapter 1200 and Chapter 1600 Chapter 1600 for ALTCS (DDD, E/PD and Tribal ALTCS) care coordination requirements and case manager responsibilities.~~

~~Refer to Chapter 600 for information regarding specific AHCCCS requirements for participating providers.~~

<sup>1</sup> Due to reformatting of the AMPM it has been determined that Chapter Overview is not needed due to each Policy moving forward will have a Purpose.



~~Refer to the AHCCCS Contractor Operations Manual (ACOM) for more information regarding AHCCCS member transition policies.~~

### DEFINITIONS

~~For the purpose of this Chapter, the following definition applies:~~

- ~~1. **Day** refers to a calendar day unless otherwise specified.~~
- ~~2. **Primary Hospital** are hospitals that are licensed institutions with at least six beds whose primary function is to provide diagnostic and therapeutic patient services for medical conditions by an organized physician staff, and have continuous nursing services under the supervision of registered nurses.~~
- ~~3. **Secondary Hospital** are hospitals that are licensed institutions capable of providing the majority of hospital-based services, both general medical and surgical, often OB and other services; but limited with regards to specialist access.~~
- ~~4. **Tertiary Hospital** are hospitals that are licensed institutions with access to just about all the majority of specialists and equipment necessary and usually receiving their patients from a large catchment area and referral base.~~

~~“Day” means a calendar day, unless otherwise specified.~~

### REFERENCES

~~Title 42 of the Code of Federal Regulations (42 C.F.R.) 422.113 (Special Rules for Ambulance Services, Emergency and Urgently Needed Services, and Maintenance and Post-Stabilization Care Services)~~

~~42 C.F.R. 438.114 (Emergency and Post-Stabilization Services)~~

~~42 C.F.R. 438.200 *et seq* (Quality Assessment and Performance Improvement Including Health Information Systems)~~

~~42 C.F.R. 431.300 *et seq* (Safeguarding Information on Applicants and Recipients)~~

~~45 C.F.R., Parts 160 and 164 (HIPAA Privacy Requirements)~~

~~Arizona Revised Statutes (A.R.S.), Title 36, Chapter 29, Articles 1, 2 and 4~~



~~A.R.S. § 36-261 et seq (Children's Rehabilitative Services)~~

~~Title 9 of the Arizona Administrative Code (9 A.A.C.), Chapters 22, 28 and 31,  
Article 2 (Scope of Service)~~

~~9 A.A.C. 22, 28 and 31, Article 5 (General Provisions and Standards)~~

~~9 A.A.C. 31, Article 16 (Services for Native Americans)~~

~~AHCCCS Contracts~~

~~AHCCCS Contractor Operations Manual (ACOM) Policy 402~~

~~ACOM Policy 404~~

~~ACOM Policy 414~~

~~ACOM Policy 426 <http://www.azahcccs.gov/shared/Downloads/ACOM/PolicyFiles/400/426.pdf>~~

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