

REVISION SUMMARY PROVIDER MANUAL
OCTOBER 2024

Chapter 100

- **Section 1.06 – Health Information Exchange (HIE)** – language added regarding the Closed Loop Referral System.
- **Section 2.01 – Provider Credentialing and Contracting for all Plans** – new requirement in ACOM 416 for providers to communicate changes to demographic information for populations served to the plan within 10 days of the change.
- **Section 4.19 – Member’s Medical Record** – page 53 – minor language update under CALOCUS; removed 45 day language in the first bullet.
- **Section 13.18 – Prior Authorization and Coordination of Benefits** – language updated to match ACOM 414.
- **Section 14.26 – Durable Medical Equipment (DME)** – language added requiring DME providers to provide order and delivery date information at least quarterly into the Provider Delivery portal in Availity.
- **Section 18.00 – Grievance System, Member Rights, and Claim Disputes** - merged all grievance, appeals and claim dispute language from all line of business specific manuals. Claim dispute language update to match August 7, 2024, provider notice.

Chapter 200

- **Section 3.05 – Behavioral Analysis Services** – language updates throughout this section.
- **Section 3.09 – Behavioral Health Provider Coordination of Care Responsibilities** – added a new section for Coordination of Care with Schools and Behavioral Health Providers.
- **Section 3.18 – SMI Eligibility Determination** – SED determination language added throughout this section.
- **Section 3.18 – SMI Eligibility Determination – Contact Guidelines for Children in the Custody of DCS** - ABHC was changed to BHH in the last section of this section.
- **Section 3.23 – Minimum Elements of the Behavioral Health Assessment** – section 13) ii. 6) e) – removed CALOCUS score criteria.
- **Section 4.02 – Referral and Intake Process** – minor language updates throughout this section including changing ABHC to BHH.
- **Chapter 8** – entire chapter deleted and reserved. Information was moved to Chapter 100 – General Terms, Chapter 18 – Grievance System, Member Rights, and Claim Disputes.

Chapter 300

- **Chapter 8** – entire chapter deleted and reserved. Information was moved to Chapter 100 – General Terms, Chapter 18 – Grievance System, Member Rights, and Claim Disputes

Chapter 400

- **Section 1.02 – Overview of Mercy ACC-RBHA – Effective Innovation** – added an additional bullet regarding ACEs.
- **Section 1.02 – Overview of Mercy ACC-RBHA – Integrated Health Home Requirements** – added item #5 regarding IDDT.

- **Section 2.00 – SME Eligibility Determination** – language relative to SED determination added throughout this section.
- **Section 2.03 – Referral and Intake Process – Direct Support and Specialty Provider Referrals** – multiple language updates throughout. **Member Self-Referrals** – age criteria removed from Behavioral Health Services in the last bullet.
- **Section 2.08 – Assessment and Service Planning – Minimum elements of the behavioral health assessment** – added language regarding ACE scores to the 4th bullet.
- **Section 2.08 – Assessment and Service Planning – Minimum elements of the behavioral health assessment** – CALOCUS score criteria removed for Strength, Needs, and Culture Discovery Document.
- **Section 2.09 – Clinical Guidelines** – added language in the first paragraph regarding members being assigned and having access to a clinical team.
- **Section 2.13 – Pre-Petition Screening, Court Ordered Evaluation, and Court Ordered Treatment – Non-emergent Process** – 2nd bullet updated.
- **Section 10.02 – Coordination of Behavioral Health Care with Other Governmental Entities – Depart of Child Safety** – added reference to AMPM 585.
- **Section 10.02 – Coordination of Behavioral Health Care with Other Governmental Entities – ADES/ADHS Arizona Families F.I.R.S.T** – added reference to the Collaborative Protocol between Mercy Care and DCS Arizona Families F.I.R.S.T Program.
- **Section 10.02 – Coordination of Behavioral Health Care with Other Governmental Entities** – added a new section for Coordination of Care with Schools and Behavioral Health Providers.
- **Section 10.02 – Coordination of Behavioral Health Care with Other Governmental Entities** – added a new section for tribal coordination of care.
- **Chapter 8** – entire chapter deleted and reserved. Information was moved to Chapter 100 – General Terms, Chapter 18 – Grievance System, Member Rights, and Claim Disputes.

Provider Requirements for Specific Programs and Services

- **Child Adolescent Specialty Provider** – language updates throughout to align with Mercy Care requirements.
- **Children’s Behavioral Health Home** – language updates throughout to align with Mercy Care requirements. Title changed to Children’s Behavioral Health Home from Children’s Assigned Behavioral Health Home.
- **Integrated Rapid Response for Children** – language updates throughout to align with Mercy Care requirements.