

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 Nonemergent 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.