"CRISIS" ENROLLMENT INPUT FILE PROCESS

AzCH Complete Care 'Crisis' Input File Process

Go-Live 6/1/2023

Revised 7/28/2023

I. INTRODUCTION

The *BH/Crisis Enrollment for Members Enrolled with Another AHCCCS Plan ("Crisis") Process* creates enrollment segments for members already enrolled with a non-AzCH Complete Care AHCCCS Health Plan. This allows Providers to submit claims for specific/limited BH Services to the RBHA that is contracted to serve the area where the billed service occurred per the AHCCCS requirement. **The current process used by AzCH Complete Care will be retired on 5/31/2023, 2:00PM CST and replaced with this process on 6/1/2023.**

The "Crisis" enrollment process is initiated by providers submitting required enrollment data to the RBHA on a "Crisis" Input File.

AzCH Complete Care providers will be expected to successfully test and be ready to begin submitting production "Crisis" Input files by 6/1/2023.

FACTS:

1. Process is known by abbreviated name of "Crisis".

2. AHCCCS requires RBHAs to cover specific BH services that occur in their GSAs even when the member is enrolled with another AHCCCS plan.

3. Process enrolls AHCCCS members with a short-term enrollment span with the RBHA of record to deliver required information to AHCCCS.

4. No "Crisis" enrollment spans are visible on the AHCCCS Online Portal. They will be visible on AzCH Complete Care's Provider Portal and AzCH Complete Care will also send status reports weekly.

5. Mainly used to cover first 24 hours of a BH crisis but can be used to cover other services that must be covered by the RBHA in the area where the services took place with approval from AzCH Complete Care's Special Program Initiatives team.
   a. Services can include other SABG Services, Acupuncture, Room and Board, etc.

6. **To prevent overlapping enrollment spans with other RBHAs which can cause claims submissions issues for you, only enroll members in the "Crisis" Enrollment process for the dates needed but no longer than 3 days per enrollment span.**

7. Claims should only be submitted after verifying that the enrollment has fully processed into AzCH Complete Care Complete Care enrollment systems using the provider web portal or weekly status report provided in this process.

8. Members can be enrolled with the "Crisis" Input File process if:

LINK: See Section VIII for examples of the below scenarios: *"Crisis" Eligibility Examples*

   a. The "Crisis" enrollment dates with AzCH Complete Care must be ≥ 10/1/2022 in this process.
   b. Enrollment span only covers services dates needed and is no longer than 3 days (unless longer span is approved by AzCH Complete Care).
   c. The service must be a "Crisis" enrollment eligible service.
   d. The physical address where the service occurred is within the AzCH Complete Care service area.
       i. **Note:** This is not member address based, it is based on the location where the service took place.
   e. They are actively enrolled with ANY AHCCCS Plan scenario below other than AzCH Complete Care (ACC or RBHA) ON the requested "Crisis" enrollment dates:
       i.   AHCCCS Fee For Service (FFS)
       ii.   Any AHCCCS Complete Care (ACC) Plan other than AzCH Complete Care
       iii. Any AHCCCS Long Term Care (LTC) Plan
       iv.   Any AHCCCS Tribal Regional Behavioral Health Authority (T/RBHA) or American Indian Health Program (AIHP)
       v.   Any AHCCCS RBHA (for Medicaid or State Only) other than AzCH Complete Care
       vi.   Incarcerated Member with frozen AHCCCS Medicaid Enrollment (e.g. CTYPRI Health Plan)
       vii. AHCCCS Medicare Savings Program (e.g. QMB, SLMB, QI1)

II. TESTING

AzCH Complete Care Providers will be required to successfully pass "Crisis" Input File testing before being permitted to submit in production.

FACTS:

1. All examples in training process documents will use the test Provider name of 'XYZ, Inc.' and Provider ID of 'XYZ'. Providers should use their assigned Provider ID found in the file specifications for Test and Production.

2. Testing for both SOE and "Crisis" Input file processing will begin 4/24/2023.

3. 25 Test Members per SOE and "Crisis" Input file
   a. SOE members should be created by provider.
   b. AzCH Complete Care will provide a list of Test members for "Crisis" no later than 4/20/2023.
   c. At least 5 of these members on each file must be "negative" test scenarios so providers can test reaction to error messages.
      i. SOE Examples – missing required data, start date after end date, etc.
      ii. Crisis Examples – members not on Test member list, missing required data, start date after end date, etc.

4. 95% successful submission of 'positive' test scenarios for each file will be considered passing for file ingestion.

   a. At least 19/20 'positive' test records should process without issue on each file and received on a Test Status report (with a non "Error Pending" status requiring resubmission for SOE.)
   b. This is cumulative, so rejected records can be resubmitted on a new test file if needed.

5. Email "Crisis" Input Test files to AzCH Complete Care Enrollment team inbox (AZCHEnrollment2@azcompletehealth.com) and copy Jack Sneed (jsneed@azcompletehealth.com) for processing ***NOT SFTP.***

   a. Email header: AC CRISIS Testing_XYZ_Test Attempt #[]
   b. File Name: Add "T[attempt #] at the end of file.
                    Example:

AC CRISIS_XYZ_20230501_T1
AC CRISIS_XYZ_20230503_T2

Tip: Follow the Work Process steps in section V below skipping any reference to SFTP and just send files to Enrollment team inbox during testing.

6. AzCH Complete Care will provide Status files for "Crisis" Test submissions; however these will be exchanged via secure email as well rather than SFTP in test.

7. In the same email you receive your test results, AzCH Complete Care will also provide your current testing status. If you have successfully passed input file testing with at least a 95% success rate, AzCH Complete Care will also ask you to attest that all response files have been integrated into your processes successfully.

Tip: This can just be a response to the email we send your results with.

8. Once attestation is received, your testing will be complete for that process.

9. You must pass testing for both "Crisis" and SOE processes to be permitted to submit files through production.

III. SFTP

AzCH Complete Care is utilizing a Secure File Transfer Protocol (SFTP) process to exchange "Crisis" files securely with providers in production after Go-Live. This will include the provider exchanging the initial "Crisis" Input file with AzCH Complete Care and AzCH Complete Care exchanging a weekly status report with the providers.

Please also note that any mention of specific directories going forward in the document are referencing the standard Centene directory setup. Some providers may have had access to the SFTP prior to this standard going live and have a different SFTP directory setup. Please see the SFTP Crosswalk document for exact locations.

FACTS:

1. For examples of the SFTP and how it integrates with the full process, see the Work Process portion of Section V.

2. "Crisis" Input File will depend on exchanging data files (in Excel format) through SFTP.

3. February 2023 – AzCH Complete Care outreached to gather SFTP log in credentials for providers that will be participating in exchanging SOE and/or "Crisis" files.
   a. 123 individual user requests received from all providers
   b. Staff with existing SFTP credentials will continue to log in using these credentials once our IT team validates current credentials.
   c. New SFTP users will receive two emails once credentials are created from 'GlobalSCAPE_SFTP@centene.com.' One email with user name and how to connect and a second email with a password.
   d. **Note that if a user already has SFTP credentials for Care1st, but are a new user for AzCH Complete Care, they will have a second log in created for AzCH Complete Care.**

4. User accounts become disabled after 90 days of non-use.

5. Files sitting on SFTP will be deleted after 14 days.

TIP: Please be sure to pull your response files to avoid them being deleted!

6. Reminder, SFTP will be used for PRODUCTION ONLY. Please do not use SFTP (other than logging in to validate credentials work) until Go-Live.

7. Providers should not drop files onto SFTP until notification is received from AzCH Complete Care to do so on Go-live.

8. If additional users need access to sftp or you are locked out of account, please reach out to AzCH Complete Care Enrollment team for assistance using the Technical Assistance Process.

9. If you need to connect to the sftp via a web browser. Log in with provided credentials: https://sftp.centene.com/

10. If you are connecting via FTP App (e.g CoreFTP, WinSCP, FileZilla) use the below connection properties (as necessary) when connecting:
    a. Host/IP/URL: sftp.centene.com
    b. Port: 22
    c. Connection Type: SSH/SFTP
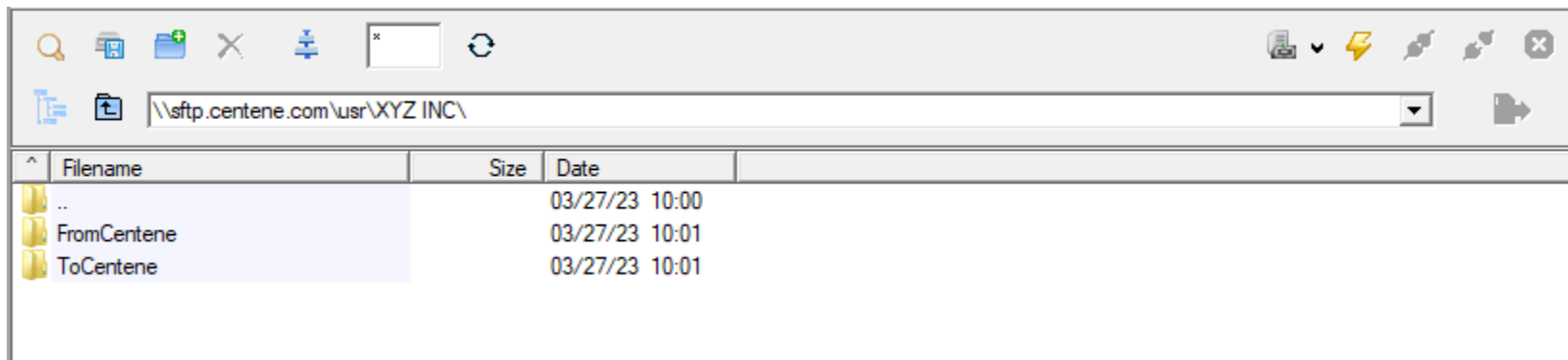
11. Go – Live Activity:
   a. All users will be granted access to ONLY their associated Provider directory. When you log in, they you see you main directory of: **\usr\ Provider Name].** In this directory you will see two sub-directories:

TIP: Examples included are from using the CoreFTP application and each user's view may vary. If using other application or web, the same directory structure will exist.

1. ToCentene Or Inbound – This is the main directory for inbound submissions from providers. "Crisis" Input files should be dropped to the specified directory below.
   a. **ToCentene/Enrollment** or **Inbound/Enrollment** is where providers will drop inbound "Crisis" files
   b. The **ToCentene/Enrollment** or **Inbound/Enrollment** directory for each provider will swept once every business day at 7:00PM CST to pick up pending "Crisis" input files.
   c. Input files are deleted from directory after they are swept.

Filename	Size	Date
..		03/27/23 10:01
AC CRISIS_XYZ_20230601.xlsx	14 KB	03/26/23 07:02

\\sftp.centene.com\usr\XYZ INC\ToCentene\Enrollment\
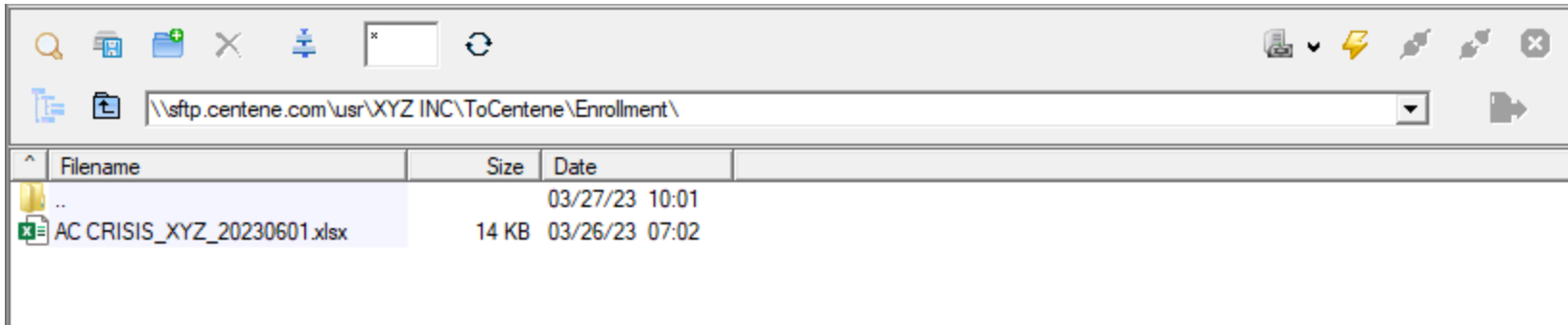
2. FromCentene or Outbound – This directory will be used for picking up status files for "Crisis" records. Pick up reports from the specified directory below.
    a. **FromCentene/Responses or Outbound/Responses** is where providers will pick up "Crisis" status reports
    b. "Crisis" Status Report will be dropped on the **FromCentene/Responses or Outbound/Responses** directory every Friday at 7:00PM CST. **Please note exact delivery time of day is approximate depending on delivery volume.**

\\sftp.centene.com\usr\XYZ INC\FromCentene\Responses\

Filename	Size	Date
..		03/27/23 10:26
AC CRISIS STATUS_XYZ_2023060...	10 KB	03/26/23 07:01
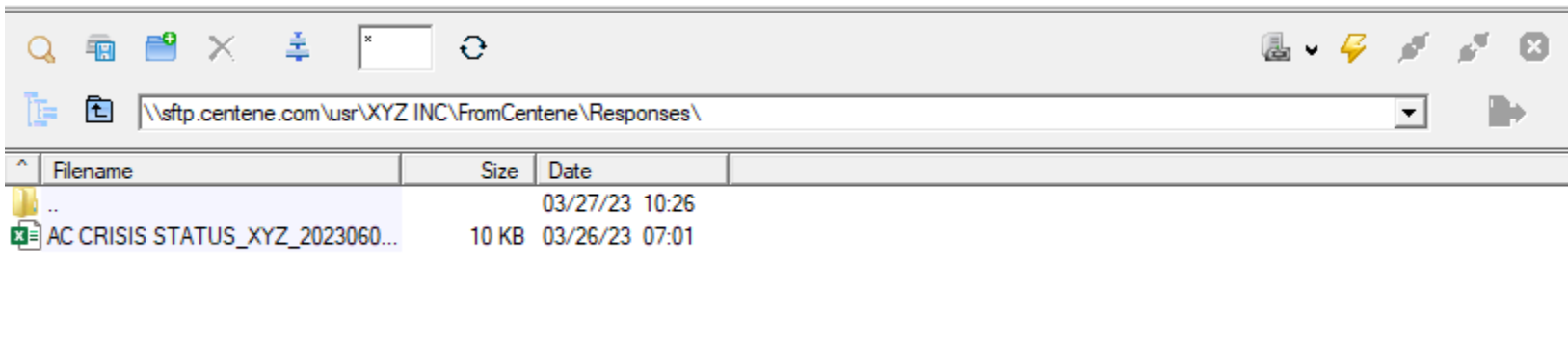
IV. PROVIDER "CRISIS" INPUT FILE SPECIFICATIONS

File Name Format: AC CRISIS_[Provider Id found in Valid Values list]_YYYYMMDD_[file differentiator if sending multiple files per day].xlsx

Examples:
AC CRISIS_XYZ_20230601_A1.xlsx
AC CRISIS_XYZ_20230601_B1.xlsx
AC CRISIS_XYZ_20230602.xlsx

File Format: Excel

SFTP Drop Location: See SFTP Crosswalk for exact location

Daily AzCH Complete Care File Pick Up: 7:00PM CST

Sample File Included with Training Documents: AC CRISIS_XYZ_20230601.xlsx

TIP: Sample file can also be used as an input file template! Just replace the sample data and be sure to change the file (including name) name to fit requirements!

FACTS:

1. All fields are required!

2. AzCH Complete Care will provide an Excel template (sample file included with training documents) for providers to use, if needed.

3. Please limit file submissions to one "Crisis" file per provider group per day. If necessary, you can add a unique identifier to the end of your "Crisis" file if multiple files need to be submitted per day, but this should be rare.

a. Example of file unique identifier:

AC CRISIS_XYZ_20230601_Tucson
AC CRISIS_XYZ_20230601_Yuma

4. File names must be unique from all previous file submissions.

5. Please see section below on each field's requirements.
   a. **Field Name listed in specs should be exact column names (in order listed) on submitted Input File.**

INPUT FILE SPECIFICATIONS:

*Asterisk indicates special criteria

Field Name	Max Field Size	Field Details	Requirement
Provider ID	3	-Provider group identifier. This will tie submitted record to a provider to send response files via SFTP. -See Valid Values list below.	Required
Provider Internal System ID	*10	-Unique ID created by the provider. -ID will be sent back on response files so provider can update their systems. -Each member should have a unique ID per provider to avoid submission issues. -Providers should use their provider ID at beginning of ID to avoid duplication issues.	Required

Field Name	Max Field Size	Field Details	Requirement
		Example - Community Bridges starts all Provider Internal System IDs with **'CBI%%%%%%'** **-*Provider Internal System ID _MUST_ be 10 characters in length. They should begin with the Provider ID as noted above and end with 7 additional characters (numbers or letters).**	
AHCCCS ID	9	-Member's Medicaid ID -Must begin with 'A' (case sensitive) and followed by 8 numbers	Required
Last Name	20	Member's last name found in AHCCCS Online.	Required
First Name	12	Member First Name found in AHCCCS Online.	Required
Date of Birth	8	Member's DOB in YYYYMMDD format	Required
Enrollment Begin Date	8	Date enrollment span begins in YYYYMMDD format	Required
Enrollment End Date	8	Date enrollment span ends in YYYYMMDD format	Required
Current AHCCCS Health Plan	40	-Enrollment Plan for enrollment dates being requested -Drop down list included in template - See Valid Values list below.	Required

VALID VALUES LIST:

Provider ID	Description
BAN	BANNER-UNIVERSITY HEALTH CARE
BLA	EASTERSEALS BLAKE FOUNDATION
CAR	CARING CONNECTIONS
CBI	COMMUNITY BRIDGES
CDL	CASA DE LOS NINOS
CHA	COMMUNITY HEALTH ASSOC
COD	CODAC
CON	CONNECTIONS SOUTHERN AZ
COP	COPE INC.
CPI	COMMUNITY PARTNERS INTEGRATED HEALTHCARE
CPR	CRISIS PREPARATION AND RECOVERY
CRO	CROSSROADS MISSION
HAV	THE HAVEN
HHW	HORIZON HEALTH AND WELLNESS
HOP	HOPE INC
LFC	LAFRONTERA CENTER, INC.
MHC	MARANA HEALTH CARE
PAT	PATHWAYS
SEA	SEABHS
SOL	SOLARI
SPE	SPECTRUM
TOU	TOUCHSTONE

Current AHCCCS Health Plan
AHCCCS Complete Care other than AzCH
SMI Integrated other than AzCH
State Only other than AzCH
RBHA Only other than AzCH
AIHP
LTC
QMB or SLMB
Other

V. PROVIDER "CRISIS" INPUT FILE SUBMISSION PROCESS (PRODUCTION)

Providers will initiate the "Crisis" Enrollment Process by submitting a "Crisis" Input file to AzCH Complete Care via SFTP.

FACTS:

1. It is expected that you will ensure that proper validation as described in the **FACTS** section of Section I is being completed using AHCCCS Online to avoid invalid submissions which lead to production delays.

2. It is expected that AzCH Complete Care will provide resolution on each submitted record via reporting on the SFTP within 10 business days whether the record was fully processed or rejected due to error. We will only send records that you have submitted, other providers will not see your submission statuses.

3. AzCH Complete Care turnaround times for "Crisis" Input file status and resolution begin the business day after the provider submits the input file.
   a. If an input file is dropped on SFTP on Monday, the turnaround time monitoring would begin Tuesday.

WORK PROCESS:

LINK: See Section VIII for examples of how a provider would work this process: *Provider "CRISIS" Input File Work Process*

Providers will use the "Crisis" Input file to request enrollment spans for eligible services. See File Specifications section for more information on file layouts and processing edits. AzCH Complete Care will also provide a "Crisis" Input File template for any providers that will be managing this process manually.

1. You will drop "Crisis" input file onto the designated SFTP directory.

2. AzCH Complete Care automated jobs will sweep SFTP and pull any "Crisis" input files at 7:00PM CST every business day.

3. AzCH Complete Care Enrollment team will review files and submit any accepted records to AHCCCS for processing.

4. AHCCCS will send response files back to AzCH Complete Care within 2 business days.

5. AzCH Complete Care will load any AHCCCS accepted records to systems for Claims submissions within 2 business days of notification from AHCCCS.

6. AzCH Complete Care will provide a weekly Status Report to you to review the status of each pending "Crisis" record in your designated SFTP directory. You will use report to update statuses in your system and/or perform further action. See Status Report section for more information and specifications for status report.

7. If record needs to be resubmitted due to a 'Denied' message on the status file, resend record on your next file with the corrected data if that is the correct action to take!
   a. Ensure you are using the same Provider ID and Provider Internal ID to match your previous submission!

VI. "CRISIS" STATUS REPORTS FILES SPECIFICATIONS

AzCH Complete Care will provide a weekly "Crisis" Status Report for providers to utilize in their processes.

"Crisis" Input File Status Report

File Name Format: AC CRISIS STATUS_[Provider ID]_YYYYMMDD.xlsx

File Format: Excel

SFTP Drop Location: See SFTP Crosswalk for exact location

File Drop Schedule: Friday 7:00PM CST

FACTS:

1. Report provides a status of each provider's submitted "Crisis" records.

2. Allow up to 1 reporting cycle for submissions to show on their first "Crisis" Status Report.

3. Allow up to 1 reporting cycle for submissions to fall off future reports once they show up in an Accepted or Denied status.

4. Other than Status and Error Message, all data on report is generated from the input file the record was received on.

5. Any "Denied" records will not be submitted any further. You can resubmit on a new input file if corrections are needed.

REPORT SPECIFICATIONS:

Report field list	Report field note
Provider ID	
Provider Internal System ID	
AHCCCS ID	Member Medicaid ID
Last Name	
First Name	
Date of Birth	YYYYMMDD
Enrollment Begin Date	YYYYMMDD
Enrollment End Date	YYYYMMDD
Status	See Valid Values List Below
Error Message	-Received mainly on 'Denied' Status - May also include a note from AzCH when enrollment dates need to be adjusted to not cause overlaps with existing enrollments

VALID VALUES LIST:

"Crisis" Status	Description	Responsible for Next Steps
Received	Record has been received by RBHA and is pending review.	AzCH Complete Care
Denied	– Record rejected by AzCH Complete Care or AHCCCS. Error message describing issue provided. -Providers are required to review and determine next steps for enrollment. -Ensure that same Provider ID and Provider Internal System ID are used on any resubmission to tie submissions together.	Provider
Sent	Record sent to AHCCCS and awaiting approval.	AHCCCS

"Crisis" Status	Description	Responsible for Next Steps
Accepted	-Record passed AHCCCS review and has successfully been loaded to AzCH Complete Care systems. -Claims can be submitted for approved enrollment period.	Provider

VII. TECHNICAL ASSISTANCE

If technical assistance is needed for "Crisis" Input File submission or any other enrollment data related concern, please send an email to the AzCH Complete Care Enrollment team for assistance.

FACTS:

1. **AzCHEnrollment2@azcompletehealth.com**
   a. Please ensure that this inbox is in the 'To' line.

2. Ensure all messages are sent securely to protect PHI.

3. For production, this inbox is only to be used for technical assistance for following issues. All other requests will be sent back to sender to reach out to Provider Network Management for assistance if necessary.
   a. **SOE Input file submission issue**
      i. Subject line should begin with "AzCH Complete Care SOE Issue"
      ii. Be sure to provide below information for ALL records/members.
         1. Member AHCCCS ID (If Known)
         2. Provider Internal System ID
         3. Provider ID
         4. Member First/Last Name
         5. Member DOB
         6. SOE Start Date
         7. SOE End Date
         8. SOE Input File Name record submitted on (if relevant to issue)
         9. Error/Rejection message received back on SOE Status report that you need assistance with (If relevant to issue)
         10. Detail on issue you are experiencing
   b. **SOE Input file Change request.** If you need to make any changes to an ACTIVE AzCH Complete Care SO Member's demographics (Name, DOB, etc.), please send request via email.
      i. Subject line should begin with "AzCH Complete Care SOE Change"
      ii. Be sure to provide below information for ALL records/members.
         1. Member AHCCCS ID

2. Provider Internal System ID
3. Provider ID
4. Member Current AHCCCS First/Last Name
5. Member Current DOB
6. SOE Start Date
7. Detail what change is needed

    iii. All changes will be made effective the date of submission.
    iv. Change can only be made by provider that submitted initial SOE request. AzCH Complete Care will advise if this is not the case in the email response and which provider to coordinate the change with.

c. **SOE Input file Term request.** If you need to terminate any ACTIVE AzCH Complete Care SO Member, please send request via email.

    i. Subject line should begin with "AzCH Complete Care SOE Term"
    ii. Be sure to provide below information for ALL records/members.

1. Member AHCCCS ID
2. Provider Internal System ID
3. Provider ID
4. Member Current AHCCCS First/Last Name
5. Member Current DOB
6. SOE Start Date
7. Indicate if you would like a current day or end of month term? AHCCCS only allows these two options.

    iii. Term request can only be made by provider that submitted initial SOE request. AzCH Complete Care will advise if this is not the case in the email response and which provider to coordinate the change with.

d. **"Crisis" Input file submission issue**

    i. Subject line should begin with "AzCH Complete Care Crisis Issue"
    ii. Be sure to provide below information for ALL records/members.

1. Member AHCCCS ID (If Known)
2. Provider Internal System ID
3. Member First/Last Name
4. Member DOB
5. "Crisis" Start Date
6. "Crisis" End Date
7. "Crisis" Input File Name record submitted on (if relevant to issue)

8. Error/Rejection message received back on Crisis Status report that you need assistance with (if relevant to issue)
9. Detail on issue you are experiencing

    e. **AHCCCS/AzCH Complete Care Enrollment Portal discrepancies**
- i. Subject line should begin with "AHCCCS/AzCH Complete Care Enrollment Portal Issue"
- ii. Be sure to provide below information for ALL records/members.
    1. Member AHCCCS ID (If Known)
    2. Member First/Last Name
    3. Member DOB
    4. Enrollment Start Date
    5. Enrollment End Date
    6. Detail on issue you are experiencing

    f. **SFTP New User Request:** For users that will need to submit SOE or "Crisis" input files.
- i. Subject line should begin with "AzCH Complete Care SFTP New User"
- ii. Be sure to provide below information for ALL records/members.
    1. New user's first and last name
    2. New user's email address
    3. New user's associated Provider
    4. New user's business phone number
- iii. New user will receive log in credentials from 'GlobalScape' email once completed.

    g. **SFTP Account Password Reset Request:** To be used to refresh user log in due to inactivity or too many incorrect login attempts.
- i. Subject line should begin with "AzCH Complete Care SFTP Password Reset"
- ii. Be sure to provide below information for ALL records/members.
    1. User's first and last name
    2. User's email address
    3. User's associated Provider
    4. User's business phone number
    5. User' login/username (do not send password!)
- iii. New user will receive new password from 'GlobalScape' email once completed.

4. Please only send one email per specific issue type as AzCH Complete Care will be tracking trends for the first 90 days.
   a. You can include multiple members in each individual email for a specific issue type. Just add all the required data per issue into an Excel spreadsheet for easier access and review!

5. Expect a response from an Enrollment team representative within 5 business days.
    a. Are any processing or email responses not meeting promised turn around?
        i. Escalate to – Francesca Douglas, Senior Manager Enrollment, francesca.douglas@centene.com and Bennie Johnson, Enrollment Supervisor, bennie.johnson@centene.com and copy Jack Sneed, Health Plan Business Analyst, jsneed@azcompletehealth.com

VIII.   REFERENCES

See below for screen prints and examples of topics discussed in this Process Guide.

1. SECTION I – INTRODUCTION

A.   "Crisis" Eligibility Examples

a.   *Scenario: Member Submitted on "Crisis" Request Template Without AHCCCS ID*

Test Member Case: Provider wants to submit "Crisis" Enrollment Span effective 10/1/2022-10/2/2022 for Jonathan Smith, DOB 2/2/1995, M, No AHCCCS ID.

Research: As AHCCCS ID for member was not provided, record cannot be submitted to AHCCCS.

Result: Record will be rejected by AzCH Complete Care and sent back to provider for review on weekly status report.

b.   *Scenario: Member Found on AHCCCS Online Portal, but no active eligibility.*

Test Member Case: Provider wants to submit "Crisis" enrollment effective 10/1/2022-10/2/2022 request for member found on AHCCCS Online portal.

Research: Member searched by AHCCCS ID/DOB and found termed effective 7/31/2022 however no active enrollment to cover enrollment dates exist.

Eligibility Renewal Date	
Eligibility Renewal Date:	05/31/2023

Eligibility				
Eligibility Group Description	Insurance Type	Begin Date	End Date	Added On
ACUTE	MC MEDICAID	05/01/2021	07/31/2022	04/18/2021

Medical Enrollment					
Health Plan ID/Description	Period Start	Period End	Rate Code	Contract Type	Insurance Type
010422 AZ COMPLETE HEALTH CARE	05/01/2021	07/31/2022	3716 - ADULT <40% EXP MALE 21-44 NO MDC	A ACC/CAP	HM HEALTH MAINTENANCE ORGANIZATION (HMO)
⊞ Service Type Codes					

Behavioral Health Services				
BHS Category	Begin Date	End Date	BHS Site	BHS Service Type
G GENERAL MENTAL HEALTH SERVICES	05/16/2020	07/31/2022	51 ARIZONA COMPLETE HEALTH	CH MENTAL HEALTH FACILITY - OUTPATIENT

Result: "Crisis" enrollment request cannot be submitted to AzCH Complete Care. Work with RBHA of record to submit SOE for start dates. If "Crisis" still needs to be submitted to AzCH Complete Care, resubmit after SOE has been fully processed by RBHA of record and AHCCCS.

c. *Scenario: Member Found on AHCCCS Online Portal with active eligibility with AzCH Complete Care ACC*

Test Member Case: Provider wants to submit "Crisis" enrollment effective 10/1/2022-10/2/2022 request for member found on AHCCCS Online portal.

Research: Member searched by AHCCCS ID/DOB and found actively enrolled effective with AzCH Complete Care on DOS

Eligibility Renewal Date	
Eligibility Renewal Date:	11/30/2023

Eligibility				
Eligibility Group Description	Insurance Type	Begin Date	End Date	Added On
ACUTE	MC MEDICAID	11/01/2021		10/25/2021

Medical Enrollment					
Health Plan ID/Description	Period Start	Period End	Rate Code	Contract Type	Insurance Type
010422 AZ COMPLETE HEALTH CARE	11/01/2021		1018 - TANF 45-64 M & F NON-MEDICARE	A ACC/CAP	HM HEALTH MAINTENANCE ORGANIZATION (HMO)
⊞ Service Type Codes					

Behavioral Health Services				
BHS Category	Begin Date	End Date	BHS Site	BHS Service Type
G GENERAL MENTAL HEALTH SERVICES	12/09/2020		51 ARIZONA COMPLETE HEALTH	CH MENTAL HEALTH FACILITY - OUTPATIENT

Result: "Crisis" enrollment request should not be sent to AzCH Complete Care. Claims should just be submitted to AzCH Complete Care as the RBHA of record.

d. *Scenario: Member Found on AHCCCS Online Portal with active eligibility with AzCH Complete Care RBHA.*

Test Member Case: Provider wants to submit "Crisis" enrollment request effective 1/1/2023-1/3/2023 for member found on AHCCCS Online portal.

Research: Member searched by AHCCCS ID/DOB and found actively enrolled effective with AzCH Complete Care RBHA on DOS.

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Eligibility Renewal Date	
Eligibility Renewal Date:	08/31/2023

Eligibility				
Eligibility Group Description	Insurance Type	Begin Date	End Date	Added On
BEHAVIORAL HEALTH STATE O	MC MEDICAID	12/20/2022		03/23/2023

Medical Enrollment					
Health Plan ID/Description	Period Start	Period End	Rate Code	Contract Type	Insurance Type
NONAHC NON-AHCCCS	03/23/2023		S000 - STATE-ONLY BHS	9 NON/AHC	MC MEDICAID
NONAHC NON-AHCCCS	12/20/2022	03/22/2023	S000 STATE-ONLY BHS	9 NON/AHC	MC MEDICAID

Behavioral Health Services				
BHS Category	Begin Date	End Date	BHS Site	BHS Service Type
G GENERAL MENTAL HEALTH SERVICES	03/23/2023		39 CIC<10-1/AZCOMPHTH NON19>10-1	CH MENTAL HEALTH FACILITY - OUTPATIENT
G GENERAL MENTAL HEALTH SERVICES	12/20/2022	03/22/2023	39 CIC<10-1/AZCOMPHTH NON19>10-1	CH MENTAL HEALTH FACILITY - OUTPATIENT

Result: "Crisis" enrollment request should not be sent to AzCH Complete Care. Claims should just be submitted to AzCH Complete Care as the RBHA of record.

e. *Scenario: Member Found on AHCCCS Online Portal with active FFS eligibility*

Test Member Case: Provider wants to submit "Crisis" enrollment requests effective 11/18/2022-11/30/2022 for member found on AHCCCS Online portal.

Research: Member searched by AHCCCS ID/DOB and found FFS Enrollment span effective 11/18/2022-11/30/2022.

Eligibility Renewal Date

Eligibility Renewal Date:	12/31/2023

Eligibility

Eligibility Group Description	Insurance Type	Begin Date	End Date	Added On
ACUTE	MC MEDICAID	03/01/2019		03/21/2019

Medical Enrollment

Health Plan ID/Description	Period Start	Period End	Rate Code	Contract Type	Insurance Type
010254 CARE1ST HEALTH PLAN ➕ Service Type Codes	12/05/2022		3718 - ADULT <40% EXP M&F 45-64 NO MDC	A ACC/CAP	HM HEALTH MAINTENANCE ORGANIZATION (HMO)
010254 CARE1ST HEALTH PLAN ➕ Service Type Codes	12/01/2022	12/04/2022	371H ADULT <40% EXP M&F 45-64 NO MDC PPC	H ACC/PPC	HM HEALTH MAINTENANCE ORGANIZATION (HMO)
008690 FFS TEMPORARY ➕ Service Type Codes	11/18/2022	11/30/2022	3718 ADULT <40% EXP M&F 45-64 NO MDC	E ACC/FFS	MC MEDICAID

Behavioral Health Services

BHS Category	Begin Date	End Date	BHS Site	BHS Service Type
G GENERAL MENTAL HEALTH SERVICES	12/05/2022		50 CARE 1ST ARIZONA	CH MENTAL HEALTH FACILITY - OUTPATIENT
G GENERAL MENTAL HEALTH SERVICES	12/01/2022	12/04/2022	50 CARE 1ST ARIZONA	CH MENTAL HEALTH FACILITY - OUTPATIENT

Result: "Crisis" Enrollment should not be submitted with presented dates. Although the dates submitted align with the FFS enrollment dates with AHCCCS, submitted enrollments should only be 3 days long unless approved by AzCH Complete Care Special Program Initiatives team.

f. *Scenario: Member Found on AHCCCS Online Portal with active eligibility with another ACC Plan.*

Test Member Case: Provider wants to submit "Crisis" enrollment request effective 10/1/2022-10/2/2022 for member found on AHCCCS Online portal.

Research: Member searched by AHCCCS ID/DOB and found active enrollment with the Mercy Care ACC plan effective 8/1/2022

Eligibility Renewal Date	
Eligibility Renewal Date:	08/31/2023

Eligibility				
Eligibility Group Description	Insurance Type	Begin Date	End Date	Added On
ACUTE	MC MEDICAID	07/01/2022		06/03/2022

Medical Enrollment					
Health Plan ID/Description	Period Start	Period End	Rate Code	Contract Type	Insurance Type
010306 MERCY CARE PLAN	08/01/2022		3918 - NEWLY ELIGIBLE M&F 45-64 NO MDC	A ACC/CAP	HM HEALTH MAINTENANCE ORGANIZATION (HMO)
⊞ Service Type Codes					

Behavioral Health Services				
BHS Category	Begin Date	End Date	BHS Site	BHS Service Type
G GENERAL MENTAL HEALTH SERVICES	08/01/2022		54 MERCY CARE PLAN	CH MENTAL HEALTH FACILITY - OUTPATIENT

Result: "Crisis" enrollment request can be submitted to AzCH Complete Care as member is enrolled with Mercy Care on DOS.

g. *Scenario: Member Found on AHCCCS Online Portal with active eligibility with an LTC Plan.*

Test Member Case: Provider wants to submit "Crisis" enrollment requests effective 10/1/2022-10/31/2022 for member found on AHCCCS Online portal.

Research: Member searched by AHCCCS ID/DOB and found active enrollment with an LTC plan effective 3/22/2018.

Eligibility Renewal Date	
Eligibility Renewal Date:	01/31/2023

Eligibility				
Eligibility Group Description	Insurance Type	Begin Date	End Date	Added On
LTC	LC LONG TERM CARE	10/01/2017		03/22/2018

Medical Enrollment					
Health Plan ID/Description	Period Start	Period End	Rate Code	Contract Type	Insurance Type
190033 TOHONO O'ODHAM	03/22/2018		2210 - SSI DISABLED NON-MEDICARE	P LTC/CAP/PAR	MC MEDICAID
⊞ Service Type Codes					

Behavioral Health Services	
NO BHS ENROLMENT	

Result: "Crisis" enrollment request can be submitted to AzCH Complete Care as member is enrolled with Tohono O'Odham LTC on DOS.

h. *Scenario: Member Found on AHCCCS Online Portal with active eligibility with AIHP*

Test Member Case: Provider wants to submit "Crisis" enrollment request effective 10/1/2022-10/2/2022 for member found on AHCCCS Online portal.

Research: Member searched by AHCCCS ID/DOB and found active enrollment with an AIHP effective 7/29/2022.

Eligibility Renewal Date				
Eligibility Renewal Date:	08/31/2023			

Eligibility				
Eligibility Group Description	Insurance Type	Begin Date	End Date	Added On
ACUTE	MC MEDICAID	07/01/2019		08/02/2019

Medical Enrollment					
Health Plan ID/Description	Period Start	Period End	Rate Code	Contract Type	Insurance Type
999998 AHCCCS AMERICAN INDIAN HP	07/29/2022		1016 - TANF 21-44 MALE NON-MEDICARE	E ACC/FFS	MC MEDICAID
⊞ Service Type Codes					

Behavioral Health Services				
BHS Category	Begin Date	End Date	BHS Site	BHS Service Type
G GENERAL MENTAL HEALTH SERVICES	07/29/2022		98 AMERICAN INDIAN HLTH PROGRAM	CH MENTAL HEALTH FACILITY - OUTPATIENT

Result: "Crisis" enrollment request can be submitted to AzCH Complete Care as member is enrolled with AIHP on DOS.

i. *Scenario: Member Found on AHCCCS Online Portal with active State Only eligibility with another RBHA.*

Test Member Case: Provider wants to submit "Crisis" enrollment request effective 12/1/2022-12/2/2022 for member found on AHCCCS Online portal.

Research: Member searched by AHCCCS ID/DOB and found active State Only enrollment with another RBHA effective 11/30/2022.

Eligibility Renewal Date

Eligibility Renewal Date:	

Eligibility

Eligibility Group Description	Insurance Type	Begin Date	End Date	Added On
BEHAVIORAL HEALTH STATE O	MC MEDICAID	12/07/2022		03/23/2023
BEHAVIORAL HEALTH STATE O	MC MEDICAID	11/30/2022	12/02/2022	12/02/2022

Medical Enrollment

Health Plan ID/Description	Period Start	Period End	Rate Code	Contract Type	Insurance Type
NONAHC NON-AHCCCS	03/23/2023		S000 - STATE-ONLY BHS	9 NON/AHC	MC MEDICAID
NONAHC NON-AHCCCS	12/07/2022	03/22/2023	S000 STATE-ONLY BHS	9 NON/AHC	MC MEDICAID
NONAHC NON-AHCCCS	12/02/2022	12/02/2022	S000 STATE-ONLY BHS	9 NON/AHC	MC MEDICAID
NONAHC NON-AHCCCS	11/30/2022	12/01/2022	S000 STATE-ONLY BHS	9 NON/AHC	MC MEDICAID

Behavioral Health Services

BHS Category	Begin Date	End Date	BHS Site	BHS Service Type
C CHILDREN SERVICES	03/23/2023		36 CARE1ST NON19	CH MENTAL HEALTH FACILITY - OUTPATIENT
C CHILDREN SERVICES	12/07/2022	03/22/2023	36 CARE1ST NON19	CH MENTAL HEALTH FACILITY - OUTPATIENT
C CHILDREN SERVICES	12/02/2022	12/02/2022	36 CARE1ST NON19	CH MENTAL HEALTH FACILITY - OUTPATIENT

Result: "Crisis" enrollment request can be submitted to AzCH Complete Care as member is enrolled with AzCH Complete Care RBHA on DOS.

j. *Scenario: Incarcerated Member Found on AHCCCS Online Portal with Active Eligibility*

Test Member Case: Provider wants to submit "Crisis" enrollment request effective 10/5/2022-10/6/2022 for member found on AHCCCS Online portal.

Research: Member searched by AHCCCS ID/DOB and found ACC enrollment from 3/11/2022-7/28/2022. Member enrollment was suspended on 7/29/2022 due to incarceration.

Eligibility Renewal Date		
Eligibility Renewal Date:	02/28/2023	

Eligibility				
Eligibility Group Description	Insurance Type	Begin Date	End Date	Added On
ACUTE	MC MEDICAID	02/01/2020		02/20/2020

Medical Enrollment					
Health Plan ID/Description	Period Start	Period End	Rate Code	Contract Type	Insurance Type
CTYPRI NO PAYMENT	07/29/2022		3718 - ADULT <40% EXP M&F 45-64 NO MDC	1 NO/PMT	OT OTHER

CTYPRI indicates:

- This AHCCCS member's enrollment was temporarily suspended.
- This member will be automatically re-enrolled with the previous health plan upon reinstatement.
- Reinstatement typically occurs within 24-48 hours from the time AHCCCS receives information that the member can be reinstated and the effective date is retro to the date the member file is received.
- If you have questions or concerns about this member's enrollment, please note the reinstated status will appear on the online enrollment once received and processed

010422 AZ COMPLETE HEALTH CARE	03/11/2022	07/28/2022	3717 ADULT <40% EXP FEMALE 21-44 NO MDC	A ACC/CAP	HM HEALTH MAINTENANCE ORGANIZATION (HMO)
⊞ Service Type Codes					

Behavioral Health Services				
BHS Category	Begin Date	End Date	BHS Site	BHS Service Type
G GENERAL MENTAL HEALTH SERVICES	03/11/2022	07/28/2022	51 ARIZONA COMPLETE HEALTH	CH MENTAL HEALTH FACILITY - OUTPATIENT

Result: "Crisis" enrollment request can be submitted to AzCH Complete Care as member's medical enrollment is suspended effective 7/29/2022 due to incarceration.

Please note that an SOE with the provided effective dates would also be accepted as this submission would pass both process validation requirements, however it is suggested that a "Crisis" request be submitted in this instance as an end date is known.

k. *Scenario: Member Found on AHCCCS Online Portal with Active QMB Medicare Savings Eligibility*

Test Member Case: Provider wants to submit "Crisis" enrollment request effective 10/5/2022-10/6/2022 for member found on AHCCCS Online portal.

Research: Member searched by AHCCCS ID/DOB and found active QMB enrollment effective 12/26/2021.

Eligibility Renewal Date	
Eligibility Renewal Date:	02/28/2023

Eligibility				
Eligibility Group Description	Insurance Type	Begin Date	End Date	Added On
QMB	QM QUALIFIED MEDICARE BENEFICIARY	03/01/2020		02/12/2020

Medical Enrollment					
Health Plan ID/Description	Period Start	Period End	Rate Code	Contract Type	Insurance Type
008715 AHCCCS QMB - ONLY	12/26/2021		8020 - QMB ONLY	8 NON/PAY	MP MEDICARE PRIMARY
⊞ Service Type Codes					

Behavioral Health Services
NO BHS ENROLMENT

Result: "Crisis" enrollment request can be submitted to AzCH Complete Care as member is enrolled under the AHCCCS QMB plan effective 12/26/2021 and this scenario passes validation requirements.
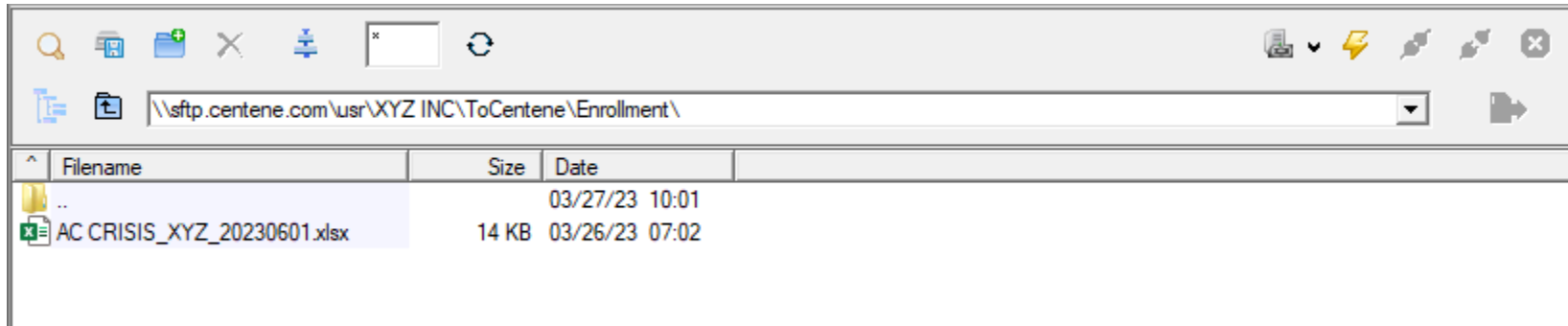
2. PROVIDER "CRISIS" INPUT FILE WORK PROCESS

a. *Scenario: Provider needs to send "Crisis" input file to AzCH Complete Care after validating that all records on file pass validation requirements*

Sample files displayed will be provided with training materials.

   i. Provider will create a "Crisis" Input file to submit to AzCH Complete Care. *Example file name AC CRISIS_XYZ_20230601.xlsx*
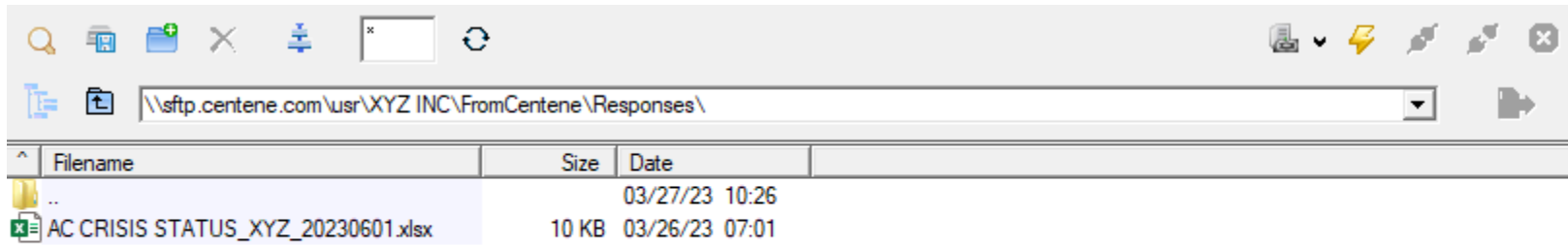
Provider ID	Provider Internal System Id	AHCCCS ID	Last name	First name	Date of Birth	Enrollment Begin Date	Enrollment End Date	Current AHCCCS Health Plan
XYZ	XYZ000050	A20330330	PRANCETEST	JUICE	19850619	20230601	20230602	AHCCCS Complete Care other than AzCH
XYZ	XYZ000051	A20330332	ROSETEST	ICE	20100708	20230601	20230603	SMI Integrated other than AzCH
XYZ	XYZ000052	A20330334	STEAMTEST JR	HOME	20100831	20220901	20220930	State Only other than AzCH
XYZ	XYZ000053	A20330337	TRIMTEST	GRAB	19880304	20220901	20220901	RBHA Only other than AzCH
XYZ	XYZ000054	A20330340	VIOLINTEST	ELSE	19880505	20221001	20221003	AIHP
XYZ	XYZ000055	A20330342	WELLTEST	DRIP	19881201			LTC
XYZ	XYZ000056	A20330344	YARNTEST	CRAM	19890210	20230601	20230601	QMB or SLMB
XYZ	XYZ000057	A20330346	ZORBTEST	BRAG		2022	2023	Other
XYZ	XYZ000058		RACKTEST III	ANT	20180824	20230601	20220930	Other
XYZ	XYZ000059	A20330348	LAMPTEST	ARGUE	20181109	20230601	10/1/2022	Other

ii.   Provider will drop input file onto SFTP designated directory.

\\sftp.centene.com\usr\XYZ INC\ToCentene\Enrollment\

Filename	Size	Date
..		03/27/23 10:01
AC CRISIS_XYZ_20230601.xlsx	14 KB	03/26/23 07:02

iii.   AzCH Complete Care automated jobs will sweep SFTP every business day at 7:00PM CST to pull any submitted files.

iv.   AzCH Complete Care Enrollment team will process submitted Input files into internal enrollment systems and review/validate all received records in the AHCCCS systems.

   i.   Records that pass validation, will be forwarded to AHCCCS for review and processing on their end.
   ii.   Records that fail validation will not be forwarded to AHCCCS and will be sent back to provider on "Crisis" Status Report.

v. AHCCCS will review and process "Crisis" Enrollment records in their system and send response files back to AzCH Complete Care typically within 2 business days.

vi. AzCH Complete Care will load response files to internal Enrollment systems.

vii. AzCH Complete Care will provide response reports to providers on SFTP designated directory.

`\\sftp.centene.com\usr\XYZ INC\FromCentene\Responses\`

Filename	Size	Date
..		03/27/23 10:26
AC CRISIS STATUS_XYZ_20230601.xlsx	10 KB	03/26/23 07:01

viii. "Crisis" Status – Weekly report will contain the current status of any pending "Crisis" records that were submitted by the provider. *Example file name AC CRISIS STATUS_XYZ_20230601.xlsx*

	PROVIDER ID	PROVIDER INTERNAL SYSTEM ID	AHCCCS ID	LAST NAME	FIRST NAME	DOB	ENROLLMENT BEGIN DATE	ENROLLMENT END DATE	CURRENT AHCCCS HEALTH PLAN	STATUS	ERROR MESSAGE
1	PROVIDER ID	PROVIDER INTERNAL SYSTEM ID	AHCCCS ID	LAST NAME	FIRST NAME	DOB	ENROLLMENT BEGIN DATE	ENROLLMENT END DATE	CURRENT AHCCCS HEALTH PLAN	STATUS	ERROR MESSAGE
2	XYZ	XYZ000050	A20330330	PRANCETEST	JUICE	19850619	20230601	20230602	AHCCCS Complete Care other than AzCH	Received	
3	XYZ	XYZ000051	A20330332	ROSETEST	ICE	20100708	20230601	20230603	SMI Integrated other than AzCH	Received	
4	XYZ	XYZ000052	A20330334	STEAMTEST JR	HOME	20100831	20220901	20220930	State Only other than AzCH	Denied	Enrollment dates prior to 10/1/2022.
5	XYZ	XYZ000053	A20330337	TRIMTEST	GRAB	19880304	20220901	20220901	RBHA Only other than AzCH	Denied	Enrollment dates prior to 10/1/2022.
6	XYZ	XYZ000054	A20330340	VIOLINTEST	ELSE	19880505	20221001	20221003	AIHP	Sent	
7	XYZ	XYZ000055	A20330342	WELLTEST	DRIP	19881201			LTC	Denied	Missing enrollment dates.
8	XYZ	XYZ000056	A20330344	YARNTEST	CRAM	19890210	20230601	20230601	QMB or SLMB	Accepted	
9	XYZ	XYZ000057	A20330346	ZORBTEST	BRAG		2022	2023061	Other	Denied	Missing DOB,invalid enrollment dates.
10	XYZ	XYZ000058		RACKTEST III	ANT	20180824	20221001	20220930	Other	Denied	Missing AHCCCS ID, enrollment end date prior to enrollment begin date.
11	XYZ	XYZ000059	A20330348	LAMPTEST	ARGUE	20181109	20230601	44835	Other	Denied	Invalid enrollment date.

ix.   Provider will review "Crisis" Status report to view the status of their submitted records. A part of this review is the 'Denied' status on the report. Provider will be required to resubmit any missing data for these records if needed (see step below on Resubmissions.)

Below is a grid of the example Provider submissions from step i, which status report they would be received on and which next steps the provider would take for each record.

PROVIDER INTERNAL ID	CRISIS STATUS	ERROR MESSAGE	Cause	Next Steps
XYZ0000050	Received			None for provider. AzCH Complete Care will review.
XYZ0000051	Received			None for provider. AzCH Complete Care will review.
XYZ0000052	Denied	Enrollment dates prior to 10/1/2022.	See error message.	Provider to review and determine if dates should be adjusted.
XYZ0000053	Denied	Enrollment dates prior to 10/1/2022.	See error message.	Provider to review and determine if dates should be adjusted.
XYZ0000054	Sent			None for provider. AHCCCS will review.

PROVIDER INTERNAL ID	CRISIS STATUS	ERROR MESSAGE	Cause	Next Steps
XYZ0000055	Denied	Missing enrollment dates.	See error message.	Resubmit record on future file with missing information.
XYZ0000056	Accepted			"Crisis" transaction complete! Submit claims.
XYZ0000057	Denied	Missing DOB, invalid enrollment dates.	See error message.	Resubmit record on future file with missing information.
XYZ0000058	Denied	Missing AHCCCS ID, enrollment end date prior to enrollment begin date.	See error message.	Resubmit record on future file with correct information.
XYZ0000059	Denied	Invalid enrollment date.	See error message.	Resubmit record on future file with correct information.

ix. _Resubmission_ – the following steps will detail how a provider would resubmit any 'Denied' records found on the "Crisis" Status report on a future "Crisis" Input file.

    a. After reviewing the "Crisis" Status report (detailed in steps vii-viii above), add the records you will be resubmitting on a new input file.

        i. **Ensure you use the same Provider Internal System ID provided on initial submission to avoid errors!**

        ii. Ensure you send a full record not just what was missing on the initial submission.

        iii. _Example file name AC CRISIS_XYZ_20221011.xlsx_

x.   Follow step i. and drop new "Crisis" Input file on SFTP.
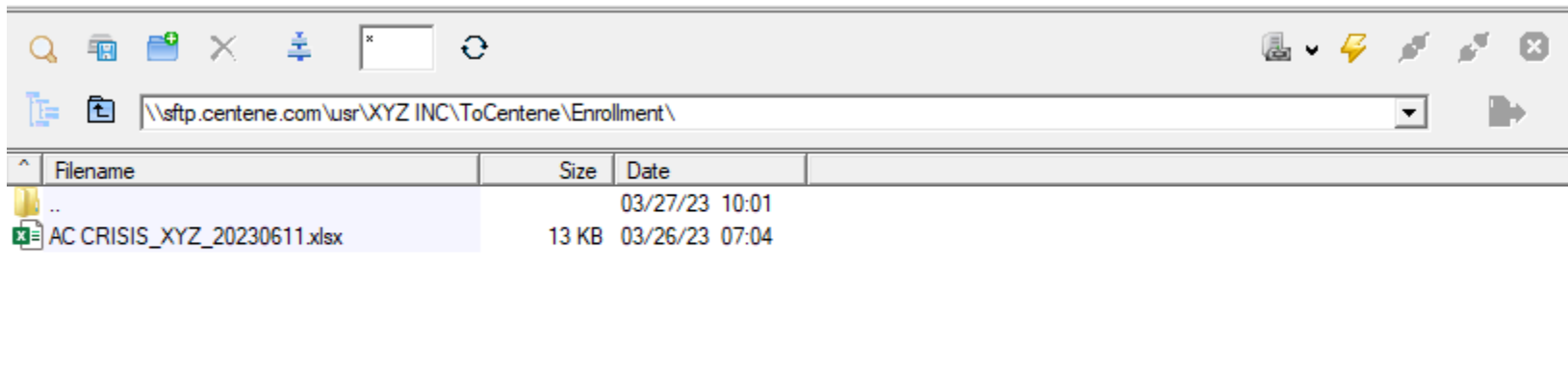
xi.   Repeat steps ii-x again to follow resubmissions through process.