

Provider Manual Updates

October 4, 2016

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The Care1st Provider Manual has been updated (October 2016 revision date) and is available on our website. In addition to a link to the complete manual, each section of the manual is set up with its own link. You may view, search and print as needed. The following table outlines the changes made by section:

Section	Title	Updates
I	Introduction	<ul style="list-style-type: none"> Provider Network Operations
II	Quick Reference Contact List	<ul style="list-style-type: none"> Department Contacts
III	Provider Roles and Responsibilities	<ul style="list-style-type: none"> Behavioral Health Appointment Availability Standards were updated ASIS website link updated
IV	Member Rights & Responsibilities	<ul style="list-style-type: none"> Added new Member Rights on Advanced Directives and Structure/Operation of Care1st and its Subcontractors Grievance timeframe was updated
V	Eligibility & Enrollment	<ul style="list-style-type: none"> Access Care rate code was changed to ACMA IVR was removed in the Eligibility Verification section Clarification added for members that are not eligible for copays, updated link to AHCCCS copay website page and other wording changes in the AHCCCS Cost Sharing & Copayments section
VI	Covered Services	<ol style="list-style-type: none"> DDD \$1000 adult dental benefit was added Information on informed Dental Consent was added Details on services includes and excluded in Maternity Care package were updated MRPDL was changed to AHCCCS Drug List in the Formulary section Podiatry benefit update confirms adults may now see a podiatrist Link to AHCCCS website and other benefit changes were updated in Non-Covered Services section
VII	Behavioral Health Services	<ul style="list-style-type: none"> Behavioral Health Coordinator phone extension was updated in Provider Support section
VIII	Claim Disputes & Appeals	<ul style="list-style-type: none"> Timely filing of claim disputes and extension timeframe parameters were updated
IX	Medical Operations	<ol style="list-style-type: none"> Care specific to the individual needs of the member was added to Specialist Responsibilities Clarification added to Rehabilitation Services (OT/PT/ST) New Care Coordination section was added MRPDL was changed to AHCCCS Drug List in the Formulary section New Prescription Drug Coverage Limitations section was added New Pharmacy Benefit Exclusions section was added New Vaccines and Emergency Medications Administered by Pharmacists to Persons Age 21 Years and Older section was added
X	Quality Management	<ul style="list-style-type: none"> Credentialing and Recredentialing overview was updated Medical Record Guidelines updated with 10/1/16 AHCCCS contract and AMPM changes Medical Record Retention updated with 10/1/16 AHCCCS contract and AMPM changes

Provider Network Operations

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Section	Title	Updates
XI	Billing, Claims and Encounters	<ol style="list-style-type: none"> 1. Emdeon name change to Change Healthcare 2. New Member Billing section was added 3. Remittance Advice Columns and Descriptions section was updated to match current remittance advice format 4. Dental information in Remittance Advices Available on Website section was updated with recent Advantica enhancements 5. Modifier section was updated to include recent changes on removal of record requirements for many codes when billed with modifier 59 6. Operative Report section was updated to reflect current situations when report is required to be billed with the claim 7. Anesthesia deletions and additions made to the nonreimbursable code table 8. New Dual Eligible GMH/SA Billing Guidelines section added 9. New Encounter Data section added

To access the provider manual: Go to www.care1st.com/az/ > Care1st > Providers > Manual

If you do not have access to the internet and need a hard copy of the manual, please contact Provider Network Operations at the number below.

Thank you!

Provider Network Operations

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