

AHCCCS Update: Minimum Subcontract Provisions

September 1, 2017

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AHCCCS made a number of updates to the Minimum Subcontract Provisions effective October 1, 2017. The following highlights the major updates. We encourage you to review the entire document, which can be found on the AHCCCS website <http://www.azahcccs.gov/>:

Choose “Plans/Providers” > “New Providers” > “Minimum Subcontract Provisions” > Select the option for the Minimum Subcontract Provisions Effective 10/1/2017.

1. Updated the definition of Subcontract. “*Subcontract*” means any Contract between the AHCCCS Contractor and a third party for the performance of any or all services or requirements specified under the Contractor’s Contract with AHCCCS, and includes any Provider Participation Agreement or Group Biller Agreement with AHCCCS.
2. Added a new section 27 Compliance with the Federal Immigration and Nationality Act (FINA) and all other Federal Immigration Laws and Regulations related to immigration status of its employees.
3. Added a new section 28 Compliance requirements for A.R.S. §41-4401, government procurement: E-Verify Requirement.
4. Insurance and Indemnification was moved to the end of the document to section 29
5. Workers’ Compensation coverage limits increased to \$1,000,000 for all limits (see page 3 for example).
6. Attachments E-1 and E-2 were renamed 29.1 and 29.2 and updated to include Sexual Abuse and Molestation (SAM) coverage requirements for subcontractors providing services to children and/or vulnerable adults.
 - a. Note: If you are unable to obtain SAM coverage under your General Liability because the insurance market will not support it, it should be included with the Professional Liability.

As a reminder, if you have not yet submitted the required insurance information, please review the attached checklist on page 4, complete it, and return it along with the Certificates of Liability that include required coverage levels, endorsements and waivers to Network Management via fax to **602.778.1875** or via email to SM_AZ_PNO@Care1stAZ.com.

Two sample ACORD statements are included on pages 2 and 3 to assist you and your insurance agent/broker in understanding what is needed:

1. Commercial General Liability and Business Automobile Liability – includes limits, Sexual Abuse and Molestation, endorsement and waiver of subrogation language
2. Worker’s Compensation and Employers’ Liability – includes limits and waiver of subrogation language
3. Professional Liability – includes Sexual Abuse and Molestation coverage if not included under the General Liability policy

If you have any questions or need assistance in downloading the information, please contact Network Management using the information below.

Thank you!

Network Management

Phone 602.778.1800 or 866.560.4042 (Options in order: 5, 7) Fax 602.778.1875

E-mail: SM_AZ_PNO@Care1stAZ.com Visit our website at www.care1staz.com

Looking for your assigned Provider Network Rep? On our website go to Providers > Provider Rep Contact Info

FAX

To: Provider Network Operations Fax To: 602.778.1875

From: _____ Group: _____

Phone: _____ Date: _____

Re: AHCCCS Insurance Requirements

Prior to submitting your insurance information complete this checklist, use it as a tool to address everything that's required and send it on top of your insurance document(s).

Commercial General Liability	Professional Liability
<input type="checkbox"/> ATTACHED	<input type="checkbox"/> ATTACHED <input type="checkbox"/> N/A
<input type="checkbox"/> General Aggregate \$2,000,000 <input type="checkbox"/> Products Ops Aggregate \$1,000,000 <input type="checkbox"/> Personal & Adv. Injury \$1,000,000 <input type="checkbox"/> Damage to Rented Premises \$50,000 <input type="checkbox"/> Each Occurrence \$1,000,000	<input type="checkbox"/> Each Claim \$1,000,000 <input type="checkbox"/> Annual Aggregate \$2,000,000
Business Automobile Liability	Workers' Compensation Liability
<input type="checkbox"/> ATTACHED <input type="checkbox"/> N/A	<input type="checkbox"/> ATTACHED <input type="checkbox"/> N/A
<input type="checkbox"/> Combined Single Limit \$1,000,000	<input type="checkbox"/> Each Accident \$1,000,000 <input type="checkbox"/> Disease – Each Employee \$1,000,000 <input type="checkbox"/> Disease – Policy Limit \$1,000,000

Your Certificates of Insurance must include the minimum requirements outlined in the tables above and the following endorsement, waiver of subrogation and/or SAM language as applicable.

Endorsement – Required for Commercial General and Business Auto Liability

This policy contains an endorsement that includes the State of Arizona, and its departments, agencies, boards, commissions, universities, officers, officials, agents, and employees as additional insureds with respect to liability arising out of the activities performed by the Subcontractor or on behalf of the Subcontractor or Contractor.

Waiver of Subrogation – Required for all

This policy contains a waiver of subrogation endorsement in favor of the State of Arizona, and its departments, agencies, boards, commissions, universities, officers, officials, agents, and employees for losses arising from work performed by the Subcontractor or on behalf of the Subcontractor or Contractor.

Sexual Abuse and Molestation (SAM) – Required for Commercial General Liability or Professional Liability when providing services to children and/or vulnerable adults

Insurance Certificate(s) must provide the following statement “Sexual Abuse and Molestation coverage is included” or “Sexual Abuse and Molestation coverage is not excluded”.

- If you are unable to obtain SAM coverage under your General Liability because the insurance market will not support it, it should be included with the Professional Liability.

Network Management

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