

"CRISIS" ENROLLMENT INPUT FILE PROCESS

Effective 10/1/2024

Revised 4/10/2025

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

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.
 - a. AzCH-CCP's RBHA GSA is:
 - i. Southern AZ RBHA service area which includes counties: Pima, Santa Cruz, Cochise, Greenlee, Graham, Yuma and La Paz
 - 1. The Southern AZ service area also includes the San Carlos Tribal Area Zip Codes: 85542, 85192 and 85550
 - ii. Northern AZ RBHA service area which includes counties: Apache, Coconino, Mohave, Navajo and Yavapai.
- 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-CCP's Provider Portal and AzCH-CCP will also send status reports weekly.

- 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-CCP's Special Program Initiatives team.
 a. Services can include other SUBG 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-CCP 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: <u>"Crisis" Eligibility Examples</u>

- a. The "Crisis" enrollment dates with AzCH-CCP must be $\geq 10/1/2022$ for members in the Southern AZ service area and $\geq 10/1/2024$ for Northern AZ service area 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-CCP).
- c. The service must be a "Crisis" enrollment eligible service.
- d. The physical address where the service occurred is within the AzCH-CCP 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-CCP (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-CCP
 - 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-CCP

Please Note: In the following scenarios, the SOE process should be used in lieu of the "Crisis" process when an enrollment covering your DOS does not exist on the Behavioral Health Enrollment screens in AHCCCS Online (RP216 screen for PMMIS users). Encounters issues occur when an enrollment does not exist on these screens.

The "Crisis" Enrollment process can be followed to cover services for the below scenarios when another ACC-RBHA Contractor has opened an SOE for your DOS that need to be covered by AzCH-CCP.

vi. Incarcerated Member with frozen AHCCCS Medicaid Enrollment (e.g. CTYPRI/DOCMAT Health Plan)

vii. AHCCCS Medicare Savings Program (e.g. QMB, SLMB, QI1)

II. TESTING

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

Former Care1st Providers will not be required to re-test in anticipation of the 10/1/2024 migration however will be expected to begin submitting their Crisis files using the AzCH-CCP requirements outlined in this manual.

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 in place of 'XYZ' for Test and Production.
- 2. Providers requesting to be onboarded to begin submitted SOE files should reach out to their Provider Engagement Rep to verify that they are eligible for SOE submission and to set up testing.
- 3. 25 Test Members per SOE and "Crisis" Input file
 - a. SOE members should be created by provider.
 - b. AzCH-CCP 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.
- Email "Crisis" Input Test files to AzCH-CCP Enrollment team inbox (<u>AZCHEnrollment2@azcompletehealth.com</u>) for processing <u>NOT SFTP.</u>

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-CCP 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-CCP will also provide your current testing status. If you have successfully passed input file testing with at least a 95% success rate, AzCH-CCP 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-CCP 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-CCP and AzCH-CCP 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. Former Care1st providers that are submitting files through AzCH-CCP for the first time, please continue to use your current Care1st sftp log in and drop locations. We will begin picking up the AzCH-CCP branded SOE files from this same location. This is to avoid additional log in and directories needing to be created.
 - a. If you are a provider that submitted files for BOTH AzCH-CCP and Care1st prior to the migration, please continue to use both SFTP logins to drop your files.
- 2. For examples of the SFTP and how it integrates with the full process, see the Work Process portion of Section V.
- 3. "Crisis" Input File will depend on exchanging data files (in Excel format) through SFTP.
- 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.

- 7. If additional users need access to sftp or you are locked out of account, please reach out to AzCH-CCP Enrollment team for assistance using the Technical Assistance Process.
- 8. If you need to connect to the sftp via a web browser. Log in with provided credentials: <u>https://sftp.centene.com/</u>

Enhanced File Transfer	
Log In	
Username:	
Forgot Username	
Password:	
Forgot Password	
Use Java [™] enabled version	
Log In	

- 9. 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

*	Site Name Site Name
	Host / IP / URL sftp.centene.com Advanced
l	Username your usemame
ш	Port Timeout Retries
l	22 61 2 □ Retry On
	Connection Type
-	SSH/SFTP
	SSL Listings 🔽 SSL Transfers 🗖 Clear (CCC)
_	OpenSSL Windows SSL
	Connect Connect Manager Close

10. Dropping Files on SFTPa. All users will be granted access to ONLY their associated Provider directory.

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Jul		03/27/23 10:00			
J FromCentene		03/27/23 10:01			
July ToCentene		03/27/23 10:01			

- 1. **Inbound "Crisis" Files** Use the SFTP Crosswalk supplemental document for exact locations for each provider group to drop their inbound "Crisis" files as directory set up may not be the same for each provider.
 - a. The **Inbound "Crisis" file** directory for each provider will swept once every business day at 7:00PM CST to pick up pending "Crisis" input files.
 - b. Input files are deleted from directory after they are swept.

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.

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

- 2. **Outbound SOE Reports** Use the SFTP Crosswalk supplemental document for exact locations for each provider group to pick up their SOE related reports from AzCH-CCP as directory set up may not be the same for each provider.
 - a. "Crisis" Status Report will be dropped on the into each provider's listed Outbound Crisis reports directory every Friday at 7:00PM CST. Please note exact delivery time of day is approximate depending on delivery volume.

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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-CCP 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 name and contents to fit requirements!

FACTS:

- 1. All fields are required!
- 2. AzCH-CCP 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 group identifier. This will tie submitted record to a provider to send response files via SFTP.	
Provider ID	3	-See Valid Values list below.	Required
		 -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. 	
Provider Internal System ID	*10	-Providers should use their provider ID at beginning of ID to avoid duplication issues. Example - Community Bridges starts all Provider Internal System IDs with 'CBI%%%%%%'	Required

	Max		
Field Name	Field	Field Details	Paquiromont
	SIZC		Requirement
		-*Provider Internal System ID <u>MUST</u> be 10 characters in length. They should begin with the Provider ID as noted above and end with 7 additional characters (numbers or letters).	
		-Member's Medicaid ID	
		-Must begin with Λ' (case sensitive) and	
AHCCCS ID	9	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 enrollment span begins in YYYYMMDD	
Date	8	format	Required
Enrollment End Date	8	Date enrollment span ends in YYYYMMDD format	Required
		-Enrollment Plan for enrollment dates being requested	
Current AHCCCS		-Drop down list included in template	
Health Plan	40	- See Valid Values list below.	Required

Field Name	Max Field Size	Field Details	Requirement
RBHA Service		-The area where the service took place	
Area	5	-See Valid Values List below.	Required

VALID VALUES LIST:

Provider ID

Input Value	Description
BAN	BANNER-UNIVERSITY HEALTH CARE
BLA	EASTERSEALS BLAKE FOUNDATION
CBI	COMMUNITY BRIDGES
CDL	CASA DE LOS NINOS
CHA	COMMUNITY HEALTH ASSOC
CIH	CHANGEPOINT INTEGRATED HEALTH
CMS	COMMUNITY MEDICAL SERVICES
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
НОР	HOPE INC

Input Value	Description
LFC	LAFRONTERA CENTER, INC.
MHC	MARANA HEALTH CARE
MMH	MOHAVE MENTAL HEALTH CLINIC INC
PAT	CLARVIDA
POL	POLARA
SBH	SOUTHWEST BEHAVIORAL HEALTH
SEA	SEABHS
SOL	SOLARI
SPE	SPECTRUM
TER	TERROS
TGC	THE GUIDANCE CENTER
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
DCS Comprehensive Health Plan
Other

RBHA Service Area

Input Value	Description
North	Service took place in Apache, Coconino, Mohave, Navajo or Yavapai Counties
South	Service took place in Cochise, Santa Cruz, Graham, Greenlee, La Paz, Pima, Yuma counties or the San Carlos zip codes of 85542, 85192 or 85550.

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

Providers will initiate the "Crisis" Enrollment Process by submitting a "Crisis" Input file to AzCH-CCP 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-CCP 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-CCP 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: <u>Provider "CRISIS" Input File Work Process</u>

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-CCP 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-CCP automated jobs will sweep SFTP and pull any "Crisis" input files at 7:00PM CST every business day.
- 3. AzCH-CCP Enrollment team will review files and submit any accepted records to AHCCCS for processing.
- 4. AHCCCS will send response files back to AzCH-CCP within 2 business days.
- 5. AzCH-CCP will load any AHCCCS accepted records to systems for Claims submissions within 2 business days of notification from AHCCCS.
- 6. AzCH-CCP 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 REPORT SPECIFICATIONS

AzCH-CCP 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
Current AHCCCS Health	
Plan ID	Value received on input file
	-Received mainly on 'Denied' Status
	- May also include a note from AzCH-CCP when
	enrollment dates need to be adjusted to not cause
Error Message	overlaps with existing enrollments

VALID VALUES LIST:

"Crisis"		Responsible for Next
Status	Description	Steps
New	Record has been received by RBHA and is pending additional	
Pending	review.	AzCH-CCP
	Record has been received by RBHA and is pending	
Received	submission to AHCCCS.	AzCH-CCP

"Crisis" Status	Description	Responsible for Next Steps
Denied	 Record rejected by AzCH-CCP 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
Accepted	-Record passed AHCCCS review and has successfully been loaded to AzCH-CCP 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-CCP Enrollment team for assistance.

FACTS:

- 1. <u>AZCHEnrollment2@azcompletehealth.com</u>
 - 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-CCP 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-CCP SO Member's demographics (Name, DOB, etc.), please send request via email.
 - i. Subject line should begin with "AzCH-CCP 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-CCP 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-CCP SO Member, please send request via email.
 - i. Subject line should begin with "AzCH-CCP 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 (must be the current SO start date with AzCH-CCP)
 - 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-CCP 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-CCP 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-CCP Enrollment Portal discrepancies
 - i. Subject line should begin with "AHCCCS/AzCH-CCP 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-CCP 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-CCP 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-CCP 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 your assigned Provider Engagement Representative to be routed to the correct contact.

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-CCP 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.

		Eligit	oility 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
		Me	dical Enrollmont			
Health Plan ID/Description	Period Start	Period End	Rate Code	Contract T	ype Insu	urance 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 I ORG	HEALTH MAINTENANCE ANIZATION (HMO)
Service Type Codes						
		Behav	vioral Health Services			
BHS Category	Begin Date	End Date	BHS Site	BHS Service Ty	pe	
G GENERAL MENTAL HEALTH SERVICES	05/16/2020	07/31/2022	51 ARIZONA COMPLETE HEALTH	CH MENTAL HEAL	TH FACILITY - O	UTPATIENT

Result: "Crisis" enrollment request cannot be submitted to AzCH-CCP. Work with RBHA of record to submit SOE for start dates. If "Crisis" still needs to be submitted to AzCH-CCP, 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-CCP 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-CCP 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 Service Type Codes	<u>11/01/2021</u>		1018 - TANF 45-64 M & F NON-MEDICARE	A ACC/CAP	HM HEALTH MAINTENANCE ORGANIZATION (HMO)		

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-CCP. Claims should just be submitted to AzCH-CCP as the RBHA of record.

d. Scenario: Member Found on AHCCCS Online Portal with active eligibility with AzCH-CCP 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-CCP RBHA on DOS.

		Eligi	bility 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
Haalth Blag ID (Dependention	Pariad Chart	M	edical Enrollment	Combrack		
Health Plan 1D/Description	Period Start	Period End	Kate Code	Contract	lype Ins	urance Type
NONAHC NON-AHCCCS	03/23/2023		S000 - STATE-ONLY BHS	9 NON/AH	C MC	MEDICAID
NONAHC NON-AHCCCS	12/20/2022	03/22/2023	S000 STATE-ONLY BHS	9 NON/AH	с мс	MEDICAID
		Beha	vioral Health Services			
BHS Category	Begin Date	End Date	BHS Site	BHS Service 1	ype	
G GENERAL MENTAL HEALTH SERVICES	03/23/2023		39 CIC<10-1/AZCOMPHTH NON19>10-1	CH MENTAL HE	ALTH FACILITY -	OUTPATIENT
G GENERAL MENTAL HEALTH SERVICES	12/20/2022	03/22/2023	39 CIC<10-1/AZCOMPHTH NON19>10-1	CH MENTAL HE	ALTH FACILITY -	OUTPATIENT

Result: "Crisis" enrollment request should not be sent to AzCH-CCP. Claims should just be submitted to AzCH-CCP 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					
rthathatha						

	Englointy			
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	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-CCP 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

		Elig	ibility 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
Health Blan ID / Description	Deriod Start	M Deriod End	ledical Enrollment	Contract T	une I	
nearth Plan 10/ Description	Period Start	Period cild	Rate Code	Contract I	уре п	м неатти матитемансе
010306 MERCY CARE PLAN	08/01/2022		3918 - NEWLY ELIGIBLE M&F 45-64 NO MDC	A ACC/CAP	0	RGANIZATION (HMO)
Service Type Codes						
		Beha	vioral Health Services			
BHS Category	Begin Date	End Date	BHS Site	BHS Service Ty	pe	
G GENERAL MENTAL HEALTH SERVICES	68/01/2022		54 MERCY CARE PLAN	CH MENTAL HEAL	TH FACILITY	- OUTPATIENT

Result: "Crisis" enrollment request can be submitted to AzCH-CCP 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.

		Eligi	ibility Renewal Date			
Eligibility Renewal Date:	01/31/2023					
			Eligibility			
Eligibility Group Description	In	surance Type		Begin Date	End Date	Added On
LTC	LC	LONG TERM CA	RE	10/01/2017		03/22/2018
		M	edical Enrollment			
Health Plan ID/Description	Period Start	Period End	Rate Code	Contract	Type Ins	urance Type
190033 TOHONO O'ODHAM	03/22/2018		2210 - SSI DISABLED NON-MEDICARE	P LTC/CAP	/PAR MC I	MEDICAID
E Service Type Codes						
		Behav	vioral Health Services			
			NO BHS ENROLMENT			

Result: "Crisis" enrollment request can be submitted to AzCH-CCP 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.

		Elig	ibility 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
		M	ledical Enrollment			
Health Plan ID/Description	Period Start	Period End	Rate Code	Contract 1	Type Insi	urance Type
999998 AHCCCS AMERICAN INDIAN HP	07/29/2022		1016 - TANF 21-44 MALE NON-MEDICARE	E ACC/FFS	MC I	MEDICAID
E Service Type Codes						
		Behav	vioral Health Services			
BHS Category	Begin Date	End Date	BHS Site	BHS Service Typ	e.	State State State
G GENERAL MENTAL HEALTH SERVICES	07/29/2022		98 AMERICAN INDIAN HLTH PROGRAM	CH MENTAL HEALT	TH FACILITY - OU	TPATIENT

Result: "Crisis" enrollment request can be submitted to AzCH-CCP 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-CCP as member is enrolled with AzCH-CCP 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.

		Eligi	bility Renewal Date			
Eligibility Renewal Date:	02/28/2023					
			Eligibility			
Eligibility Group Description	1	Insurance Type		Begin Date	End Date	Added On
ACUTE	I	MC MEDICAID		02/01/2020		02/20/2020
		Me	edical Enrollment			
Health Plan ID/Description	Period Start	Period End	Rate Code	Contract T	ype I	nsurance Type
CTYPRI NO PAYMENT	07/29/2022		3718 - ADULT <40% EXP M&F 45-64 NO MDC	1 NO/PMT	0	T OTHER
CTYPRI indicates:						
This AHCCCS member's enrollmer	t was temporarily suspe	nded.				
 This member will be automatically Reinstatement typically occurs wit member file is received. 	hin 24-48 hours from th	e time AHCCCS re	upon reinstatement. ceives information that the member can be reins	tated and the effe	ctive date is r	etro to the date the
 If you have questions or concerns 	about this member's en	rollment, please n	ote the reinstated status will appear on the online	e enrollment once	received and	processed
010422 AZ COMPLETE HEALTH CARE	03/11/2022	07/28/2022	3717 ADULT <40% EXP FEMALE 21-44 NO MD	C A ACC/CAP	н	M HEALTH MAINTENANCE RGANIZATION (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-CCP 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.

		Eligi	bility Renewal Date			
Eligibility Renewal Date:	02/28/2023					
			Eligibility			
Eligibility Group Description	1	insurance Type		Begin Date	End Date	Added On
QMB		QM QUALIFIED ME	DICARE BENEFICIARY	03/01/2020		02/12/2020
		M	edical Enrollment			
Health Plan ID/Description	Period Start	Period End	Rate Code	Contract T	ype Ins	urance Type
008715 AHCCCS QMB - ONLY	12/26/2021		8020 - QMB ONLY	8 NON/PAY	MP	MEDICARE PRIMARY
± Service Type Codes						
		Behav	ioral Health Services			
			NO BHS ENROLMENT			

Result: "Crisis" enrollment request can be submitted to AzCH-CCP 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-CCP 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-CCP. *Example file name AC CRISIS XYZ 20230601.xlsx*

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Provie XYZ XYZ XYZ XYZ	A Jer ID	B Provider Internal System Id XYZ00050 XYZ00051 XYZ00053	C A42033030 A20330332 A20330332 A20330334 A20330334 A20330337	D Last name PRANCETEST ROSETEST STEANTEST JR TRAITEST	E First name JUICE HOME GRAR	F Date of Birth 19850619 20100708 20100031 19880304	G Enrollment Begin Date 20230601 20220901 20220901 20220901	H Enrollment End Date 20230602 20230603 20220901 20220901	I Current AHCCCS Health Plan AHCCS Complete Care other than AzCH Silla long other than AzCH Silla Only other than AzCH BHA Only other than AzCH
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Provid XYZ XYZ XYZ XYZ XYZ XYZ XYZ	A der ID	8 Provider Internal System Id XY200050 XY200051 XY200052 XY200053 XY200055 SV200055	C ARCCCSID A2033030 A2033032 A2033032 A2033034 A2033034 A20330340 A20330340	D Last name PRANCETST STEATTEST STEATTEST VOLINTEST VOLINTEST	E First name JUICE HOME GRAB ELSE DIP	F Date of Birth 1895619 2010976 2010976 2010976 2010976 2010976 2010976 2010976 2010976 2010976 2010976 19882001 19882001	G Enrollment Begin Date 20230601 20220901 20220901 20220901	H Enrollment End Date 20230602 20230603 20220901 20220901 20220901	I Current AHCCCS Health Plan AHCCSS Complete Care other fran AzCH Sinte group other than AzCH Sinte group other than AzCH BRIA Only other than AzCH AHP LTC
Provie XYZ XYZ XYZ XYZ XYZ XYZ XYZ XYZ	A der ID	8 Provider Internal System Id Xr/200050 Xr/200052 Xr/200053 Xr/200055 Xr/200055 Sr/200055	C AA030030 A0303032 A0303032 A0303034 A0303034 A0303034 A03030342 A03030342	D Last name PRANCETEST STRAMTEST // VOLNTEST WELLTEST VARITEST	E Firstname UUCE ICE HOME GRAB ELSE DRP CRAM	F Date of Birth 19650619 20107708 20100708 19683304 19683304 19685305 19681201 19682210	G Enrollment Begin Date 20230601 20220901 20220901 20220901 20220901	H Enrollment End Date 20230602 20220930 20220941 20220941 20220941	I Current AHCCCS Health Plan AHCCCS Complete Care other than AzCH SMI integrated other than AzCH Sated only other than AzCH BRHA Only other than AzCH AIP LTC OMB or SJMB
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Provid XY/Z	A ier ID	B Provider Internal System Id Kr/200050 Kr/200051 Kr/200053 Kr/200054 Kr/200055 Kr/200055 Kr/200055 Kr/200055	C AACCCS ID AACCCS ID AACCCS ID AACCOS ID AACC	D Last name PRAKCETEST STRAMTEST VOLINTEST VOLINTEST VARITEST 2004TEST RACKTEST BACKTEST B	E First name UUCE CC GRAB ELSE DRP CCAM BRAG AAT	F Date of Birth 2010708 19680304 19680304 19680304 1968120 201808210 201808210	G Enrollment Begin Date 20230601 20220901 20220901 20220001 20220001 20230601 2022 20230601	H Enrollment End Date 20230602 20220930 2022091 2022003 2022003 2022001 2022003	I Current AHCCCS Health Plan AHCCCS Complete Care other than AzCH SMI Integrated Other than AzCH RBHA Only other than AzCH RBHA Only other than AzCH AIPP LTC Other Other
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Provid XY/2	4 ler ID	8 Provider Internal System Id Xr 2500050 Xr 2500051 Xr 2500052 Xr 2500055 Xr 2500055 Xr 2500055 Xr 2500055 Xr 2500055 Xr 2500055 Xr 2500055 Xr 2500055 Xr 2500055	C A20330330 A20330332 A2033032 A2033034 A2033034 A20330342 A20330342 A20330346 A20330346	D PRAJECTEST ROSETEST STAATEST R TRAMEST VOLVITEST VAATEST ZAATEST ZAATEST ACKTEST W LAIMTEST	E First name UCE CR GRAS DBP DBP DBP DBP DBP DBP DBP DBP DBP DBP	F Date of Birth 19650619 2010708 2010708 19660304 19660305 1986120 1989210 20160024 20161109	G Enrollment Begin Date 20230601 20220901 20220901 20220001 20220001 20230601 20230601 20230601	H Enrollment End Date 20230602 20220901 20220901 20220901 20220901 20220909 20230801 20230801 20230801 20230801 20230801 20230801 20230801 20230801 20230801 20230801 20230801 20230801 20230801 20230801 20230801 20230801 20230801 20230801 20230801 20230802 2023080 20230802 2023080 202000 202000 202000 2020000 202000000	Current AHCCCS Health Plan AHCCCS Complete Care other than AzCH SMI integrated other than AzCH RBHA Only other than AzCH RBHA Only other than AzCH AHP LTC UBS or SLMB Other Other Other
Provid XY2 XY2 <	A Her ID	8 Provider Internal System Id Xr/200050 Xr/200051 Xr/200053 Xr/200053 Xr/200055 Xr/200055 Xr/200055 Xr/200056 Xr/20056 Xr/200	C A4CCCS ID A4CCCS ID A2033030 A20330332 A20330334 A20330340 A20330340 A20330340 A20330340 A20330340 A20330340 A20330346 A20330346	D Last name PRANCETEST ROSETEST STEAMTEST A TAMTEST VOLNTEST VARITEST ZORFIEST RACKTEST LAMTEST	E First name JUCE HOME GRAB ELSE DRP CRAII BRAG ANT ARQUE	F Date of Birth 1985019 2010076 19850304 19850304 1985025 19881205 19881205 19882210 20160824 20161109	G Enrollment Begin Date 20230601 20220901 20220901 20220901 20220001 20230601 20230601 20230601	H Enrollment End Date 2023063 2022090 20220901 2022001 2022001 2022001 2022001 10/1/2020	Current AHCCCS Health Plan AHCCS Complete Care other than A-CCH SMI Integrated dreft than A-2CH SMI Integrated dreft than A-2CH SMI Only other than A-2CH AHP LTC OMB or SLMB Other Other Other

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

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- iii. AzCH-CCP automated jobs will sweep SFTP every business day at 7:00PM CST to pull any submitted files.
- iv. AzCH-CCP 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-CCP typically within 2 business days.
- vi. AzCH-CCP will load response files to internal Enrollment systems.
- vii. AzCH-CCP will provide response reports to providers on SFTP designated directory.

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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*

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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	CRISIS	ERROR MESSAGE	Cause	Next Steps
XYZ0000050	Received			None for provider. AzCH-CCP will review.
XYZ0000051	Received			None for provider. AzCH-CCP 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.* <u>*Resubmission*</u> 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*

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2 XYZ XYZ000053 A2	20330337 TRIMTEST	GRAB	19880304 2023	0601 20230605 RBHA Only other than AzCH
3 XYZ XYZ000055 A2	20330342 WELLTEST	DRP	19881201 2023	0601 20230601 LTC
4 XYZ XYZ000057 A2	20330346 ZORBIEST	BRAG	19990101 2023	0601 20230601 Other
6 XV7 XV200059 42	20330348 LAMPTEST	ARGUE	20100024 2023	0601 20230605 Other
7	2000010	711002	20101100	

x. Follow step i. and drop new "Crisis" Input file on SFTP.

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xi. Repeat steps ii-x again to follow resubmissions through process.