

**310-K - HOSPITAL INPATIENT GENERAL<sup>1</sup> SERVICES**

EFFECTIVE DATES: 10/01/94, 10/01/18, UPON PUBLISHING<sup>2</sup>

APPROVAL DATES: 10/01/99, 10/01/01, 10/01/06, 05/01/11, 10/01/11, 03/01/12, 10/01/12, 10/01/13, 10/01/14, 06/27/18, 07/15/24<sup>3</sup>

**I. PURPOSE**

This Policy applies to ~~AHCCCS Complete Care (ACC)~~, ACC-RBHA<sup>4</sup>, ALTCS E/PD, DCS/CHP (CHP)<sup>5</sup>CMDP(CMDP), DES/DDD (DDD), ~~and RBHA~~ Contractors; Fee-For-Services (FFS) Programs ~~as delineated within this Policy~~ including: the American Indian Health Program (AIHP), DDD THP, Tribal ALTCS, TRBHA; and all FFS populations, excluding Federal Emergency Services (FES) (For FES, ~~see~~ refer to AMPM Chapter 1100). This Policy establishes requirements regarding Hospital Inpatient General Services.

**II. DEFINITIONS**

Refer to the AHCCCS Contract and Policy Dictionary for common terms found in this Policy including<sup>6</sup>:

<u>EARLY AND PERIODIC SCREENING, DIAGNOSIS AND TREATMENT PROGRAM (EPSDT)</u>	<u>FEE-FOR-SERVICE (FFS)</u>	<u>MATERNITY CARE</u>
<u>MEDICAL SUPPLIES, APPLIANCES AND EQUIPMENT</u>	<u>MEMBER</u>	<u>OBSERVATION SERVICES</u>
<u>OCCUPATIONAL THERAPY</u>	<u>PHYSICAL THERAPY</u>	<u>PRIOR AUTHORIZATION (PA)</u>
<u>SPEECH THERAPY</u>	<u>TOTAL PARENTERAL NUTRITION</u>	

<sup>1</sup> Revised to align with AAC R9-22 Article 2. Modified throughout Policy

<sup>2</sup> Date policy is effective.

<sup>3</sup> Date Policy is approved.

<sup>4</sup> Revised to align with the Competitive Contract Expansion YH20-0002 to expand the provision of services for the awarded ACC Contractors.

<sup>5</sup> Comprehensive Medical and Dental Program (CMDP) changed to Comprehensive Health Plan (CHP) due to Behavioral health integration. Refer to Laws 2019, 1st Regular Session.

<sup>6</sup> Adding an identification table of terms used in this Policy that can be found in the AHCCCS Contract and Policy Dictionary.

### III. POLICY

AHCCCS covers medically necessary inpatient [general](#) hospital services provided by a licensed [AHCCCS registered participating](#)<sup>7</sup> hospital for all eligible members, as specified in [A.A.C.](#)<sup>8</sup> R9-22, Article 2.

1. Inpatient hospital services for members include, but are not limited to, the following:
  - a. Hospital accommodation, and appropriate staffing, supplies, equipment, [medications](#),<sup>9</sup> and services for:
    - i. Acute physical and behavioral health care,
    - ii. Intensive care and coronary care,
    - iii. Neonatal intensive care,
    - iv. Maternity care including labor, delivery and recovery rooms, birthing centers, ~~and~~ [nursery](#)<sup>10</sup> and related services,
    - v. Nursery for newborns and infants,
    - vi. Surgery including surgical suites and recovery rooms, and anesthesiology services,
    - vii. Nursing services necessary and appropriate for the member's medical condition, including assistance with activities of daily living as needed,
    - viii. Medical detoxification and treatment services,<sup>7</sup>
    - ix. Behavioral health forensic services,<sup>2</sup>
    - x. Dietary services,
    - xi. Medical supplies, appliances, and equipment consistent with the level of accommodation, and/or
    - xii. Perfusion and perfusionist services.
  - b. Ancillary Services:
    - i. Audiology services,
    - ii. Chemotherapy,
    - iii. Dental surgery for members in the Early and Periodic Screening, Diagnosis and Treatment Program (EPSDT),
    - iv. Dental surgery for members 21 years of age and older within limitations as described in AMPM Policy 310-D1 and 310-D2,
    - v. Dialysis,
    - vi. Laboratory services,
    - vii. Pharmaceutical services and prescribed drugs,
    - viii. Radiological and medical imaging services,
    - ix. Rehabilitation services including physical [therapy](#), occupational [therapy](#), and speech ~~therapies~~[therapy](#),<sup>11</sup>
    - x. Respiratory therapy,
    - xi. Behavioral health assessments and [treatment](#)~~therapy~~<sup>12</sup> including electroconvulsive therapy,
    - xii. Services and supplies necessary to store, process and administer blood and blood derivatives,
    - xiii. Total parenteral nutrition, and/or

<sup>7</sup> [Better term available.](#)

<sup>8</sup> [Revised to align with Section 504 of the Rehabilitation Act, changes made throughout the policy.](#)

<sup>9</sup> [Language added to clarify that medications are including as an inpatient hospital service.](#)

<sup>10</sup> [Grammatical revision removed duplicative language with sub bullet \(v.\).](#)

<sup>11</sup> [Revised to align with defined term.](#)

<sup>12</sup> [Better term available.](#)

xiv. Wound CCare.

~~AHCCCS does not separately cover home-based services, such as Attendant/Personal Care, while the member is in inpatient settings.~~<sup>13</sup>

2. For ALTCS E/PD and DDD members, AHCCCS will allow (under limited circumstances) for the provision of Attendant Care and Personal Care services while the member is in a hospital inpatient or emergency room setting. Refer to AMPM Policy 1240-A for additional information.<sup>14</sup>

Refer to AMPM Policy 820 for Prior Authorization (PA) Requirements for FFS providers.

Refer to AMPM Policy 310-S for Observation Services.

Refer to ACOM Policy 109 for Institute for Mental Disease (IMD) 15 Day Limit.

<sup>13</sup> Removed, as language is no longer current.

<sup>14</sup> Changes made to reflect new authority in the 1115 Section Waiver allowing flexibilities in the provision of Attendant Care/Personal Care services while the member is in a hospital inpatient or emergency room setting.