

Contractor Name: ¹		Line(s) Of Business (LOB):	
Date Submitted:		Geographic Service Areas (GSA):	
Brief Description/Name of Material Change:		DDD/CHP Impact (Y/N):	
Type of Material Change (Provider Network or Business Operations):		Unexpected Change (Y/N):	
Proposed Effective Date:		Expedited Review Requested (Y/N):	

The Contractor shall provide a response, or a designation of N/A, for each item below.
Provide a brief explanation for any item designated as N/A.

1. Overview of the Proposed Material Change

Provide a comprehensive summary of the proposed material change, including what prompted the change including but not limited to provider withdrawal, operational redesign, system change, and system upgrade. The overview shall include an explanation of why the change meets the Contractor’s criteria for a material change under ACOM Policy 439, and the reason for requesting expedited review, if applicable.

2. Provider Network Material Changes Only – Impact Summary and Accessibility Analysis

Provide an Impact Summary and Accessibility Analysis if submitting a material change to the Provider Network. Provide an impact summary by line of business including the following information with delineation by County/Geographic Service Area (GSA):

- a. The Contractor’s minimum 6-month impact assessment calculation as specified in ACOM Policy 439 (if the Contractor uses a different timeframe, this shall be identified in the submission),
- b. The total number of members in each Geographic Service Area,
- c. The number and percentage of members in the GSA currently receiving services that will be impacted by the proposed change by line of business, including any members served through DDD and CHP (as applicable),
- d. An accessibility analysis including the following as applicable:
 - i. If material change involves provider types measured under ACOM Policy 436, the Contractor shall include an ACOM Policy 436 analysis of that provider type before and after the change,
 - ii. For services provided in the member’s home, the Contractor shall address the geographic coverage and sufficiency of providers in the impacted area (reporting shall include analysis before and after the change),
 - iii. For transportation services, the Contractor shall address the availability of vehicles dedicated to the Contractor’s line of business in the impacted area (reporting shall include analysis before and after the change),
 - iv. If available, member to provider ratios before and after the material network change, and
 - v. The Contractor must demonstrate how the remaining provider network has the capacity to serve members needing to transition. When identifying providers identify those providers who are in-network but are not included in the Contractor’s Provider Director (i.e., suppressed).
- e. If the analysis indicates a change will result in the Contractor failing one or more time and distance standard in ACOM Policy 436, the Contractor shall address how it will come into compliance,
- f. Describe the Contractor’s methodology for determining the number of members impacted, and
- g. Gaps: Assessment of gaps resulting from the change and alternatives that will be used to fill the gaps.

¹ This is a new Attachment.

3. Business Operations Material Changes Only – Accessibility Summary

Provide an Accessibility Summary if submitting a material change to Business Operations

Provide an Accessibility Summary by line of business evaluating impact to members and/or provider network including the following information:

- a. Membership:
 - i. Delineation by County/GSA,
 - ii. The total number of members in each Geographic Service Area (if applicable to the proposed change), and
 - iii. The number and percentage of members impacted (if applicable to the proposed change) by line of business, including any members served through DDD and CHP (as applicable), an accessibility analysis as outlined in ACOM Policy 439, as applicable.
- b. Methodology: A description of the Contractor’s methodology for determining the number of members impacted
- c. Gaps: Assessment of gaps resulting from the change and alternatives that will be used to fill the gaps.

4. Verification of Cross-Submission to DDD and CHP (as applicable)

Provide verification of whether the change affects DDD or CHP members or providers and provide confirmation of the status of submissions to DDD or CHP (submitted/pending) including expected timelines.

5. Member and Provider Communications (Summary)

Provide a brief description of planned communications, including purpose, core messaging, and target audiences and confirmation that all draft materials are included in the submission and ready for AHCCCS review and approval. All draft member and provider communication materials (e.g., letters/notices, FAQs, scripts, handbook updates, website text) must be submitted as separate attachments as part of the material change submission and referenced in the Communication Plan tab of Attachment 439 Attachment B.

6. Services

Provide an explanation of how the provider network and/or business operations change will affect the delivery of covered services.

7. Legal Settlement Requirements

Provide an explanation of whether the change impacts the Contractor's ability to meet any previous legal settlement requirements including, but not limited to, Arnold v Sarn, Jacob's Law, the BK Settlement.

8. Monitoring

Provide an explanation of how the Contractor will monitor the impact of the change after implementation and intervene if monitoring finds deficiencies (e.g., monitoring the change through daily reporting, member grievances received).

9. Administrative Services Subcontract

If the change involves a new Administrative Services Subcontract or modification to an existing one, the Contractor shall submit the Subcontract as well as a completed ACOM Policy 438, Attachment A.

10. Grievance and Appeal System

An explanation of any change or impact to member grievances, member appeals, and provider claims disputes processes.

11. Prior Authorization

An explanation of any change or impact to the prior authorization process, including Notice of Adverse Benefit Determination (NABD) letters found in ACOM Policy 414.

12. Performance Standards

An explanation of any change in the Contractor's ability to meet applicable performance standards.

13. Supporting Documentation - Attachment

Provide confirmation and listing of completion and Attachment of ACOM Policy 439 Template(s) and any other required supporting documentation.

Contractor Point of Contact

Provide Name, Title, Email, Phone #

