

## COLOCATION WORKGROUP MEETING NOTES

January 25, 2016

Regular text = paraphrased discussion

*Italics=Department's response*

**Bold, italics, and indented=rule with changes highlighted**

### R9-10-1031

A comment was made that the terms “medical services, nursing services” should be replaced with “physical health services.”

Another comment was made that the Department should consider adding a definition for “exempt health care provider.”

*The definition of “exempt health care provider” is in A.R.S. § 36-439. The Department agrees that the terms “medical services, nursing services” should be replaced with “physical health services.” To clarify, the Department plans to change the rule as follows:*

**A. In addition to the definitions in A.R.S. §§ 36-401 and 36-439 and R9-10-101 and R9-10-1001, the following definition applies in this Section:**

**1. "Patient" means an individual who enters the premises of a collaborating outpatient treatment center to obtain physical health services or behavioral health services from the collaborating outpatient treatment center or a colocator that shares common areas with the collaborating outpatient treatment center.**

### R9-10-1031(C)

Questions were asked about why certain types of health care institutions, specifically affiliated counseling facilities and outpatient treatment centers operating under a single group license, are not permitted to be a collaborating outpatient treatment center or a colocator.

A comment was made that there is an issue with coding for services provided when billing AHCCCS.

*The Department has determined that an outpatient treatment center operating under a single group license may be following the rules in Article 10, but is not separately licensed as an outpatient treatment center. It is already operating under adjusted circumstances, shared governing authority, policies and procedures, administrator, etc. with the hospital and would not fit within the collaborating licensing scheme, either as the collaborating outpatient treatment center or as a colocator. An affiliated counseling facility may also be operating under a shared governing authority and policies and procedures with its own, separate affiliated outpatient treatment center or other counseling facility. Medical records, administrative recordkeeping, infection control, and incident reporting can be shared. It would be difficult to have an affiliated counseling facility with shared records colocated with numerous other outpatient treatment centers, exempt health care providers, and counseling facilities where medical records are also shared. An affiliated counseling facility sharing the same premises with its affiliated outpatient treatment center is just a part of the outpatient treatment center, not a colocator.*

*Any difficulties with billing AHCCCS under coding for services provided in an outpatient treatment center operating under a single group license need to be discussed and resolved thorough AHCCCS. The rule will continue to read:*

**C. The following health care institutions are not permitted to be a collaborating outpatient treatment center or a colocator in a collaborating outpatient treatment center:**

- 1. An affiliated counseling facility, as defined in R9-10-1901;**
- 2. An outpatient treatment center authorized by the Department to provide dialysis services according to R9-10-1018;**
- 3. An outpatient treatment center authorized by the Department to provide emergency room services according to R9-10-1019; or**
- 4. An outpatient treatment center operating under a single group license according to A.R.S. § 36-422 (F) or (G).**

**R9-10-1031(I)**

A comment was made that language should be added to the rule to make clear that “co-located entities are oriented to the Arizona 12 Principles and are invited to participate in Child and Family Team membership and meetings, as appropriate.”

*A rule is required to have general applicability, which these suggested requirements do not. The Department does not plan to change the rule.*