

NOTICE: Clarification of appropriate use of Respite Services S5150 and/or S5151 - AMPM 310-B and 1250-D

April 4, 2024

Dear provider,

It has been reported that providers are prescribing respite hours to members as time for relief, reflection and relaxation of the member rather than a caregiver. AHCCCS policy and Section 1115 Demonstration Waiver clearly outline the circumstances and limitations of respite and require that all providers follow these guidelines.

Respite services prescribed in any manner other than as specified below are not eligible for reimbursement.

In accordance with AMPM 310-B: Unskilled respite care (respite) is short-term behavioral health services or general supervision that provides an interval of rest or relief to a family member, or other individual caring for the member receiving behavioral health services, as authorized under the Section 1115 Waiver Demonstration and delivered by providers who meet the requirements in A.A.C. R9-10-1025 and A.A.C. R9-10-1600.

In accordance with AMPM 1250-D: Respite Care is provided as an interval of rest and/or relief to a family member or other individual caring for an ALTCS member. Respite Care may be provided by a respite provider coming to the member's home, or by admitting the member to a licensed institutional facility or an approved Alternative HCBS setting for the respite period. Respite care may only be delivered as specified in the member's Person-Centered Service Plan and requires prior authorization by the case manager.

AHCCCS is requesting that all contracted health plans provide clarification to providers that are able to bill S5150 and/or S5151, to ensure that respite hours are *only* prescribed and used as specified in AMPM 310-B and 1250-D.

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