



Section 3.29 **Technology**

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3.29.1 **Introduction**

This policy applies to Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS) Tribal/Regional Behavioral Health Authorities (T/RBHAs) and their subcontractors. The purpose is to establish the ADHS/DBHS policy and process related to the review and approval of new technologies, including the usage of new applications for established technologies. New technologies also encompass new delivery systems of medications if that delivery system is a device. For the purposes of this policy, newly developed non-device delivery systems (such as microspheres, oral dissolving systems) are not considered new technologies.

3.29.2 **Terms**

Definitions for terms are located online at <http://www.azdhs.gov/bhs/definitions/index.php> or <http://www.narbha.org/for-providers/provider-resources/provider-policy-manual/definitions>. The following terms are referenced in this section:

[Approval](#)

[Evidence Based Practice](#)

[Experimental or Investigational Therapies](#)

[Peer Reviewed Literature](#)

[Technology](#)

3.29.3 **Procedures**

- a. ADHS/DBHS will ensure review and consider adoption of new technologies and/or adoption of new uses to existing technologies utilizing evidence based research and guidelines. The process includes evaluation of the FDA approved use, evidence based research, guidelines and analyses of related peer reviewed literature published in the United States. Peer-reviewed medical literature must include well-designed investigations that have been reproduced by nonaffiliated authoritative sources. The literature must also include positive endorsements by national medical bodies or panels regarding scientific efficacy and rationale.
- b. Providers may initiate a request for T/RBHA coverage of new approved technologies including the usage of new applications for established technologies by submitting the proposal in writing to the T/RBHA Medical Director for review. The proposal shall include:



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- i. FDA approval of the new technology and the approved indication;
 - ii. Medical necessity criteria and supporting documentation;
 - iii. Peer reviewed literature indicating the efficacy of the new technology or the modification in usage of the existing technology, if available; and
 - iv. A cost analysis including the financial impact to the T/RBHA for the new technology.
 - v. Relevant coverage decisions made by Medicare intermediaries and carriers, national Medicare coverage decisions, and Federal and State Medicaid coverage decisions.
- c. T/RBHAs shall participate in the review of newly requested technologies, including the usage of new applications for established technologies through the T/RBHA Pharmacy and Therapeutics Committee and the Medical Management Committee. T/RBHAs will consider coverage rules, practice guidelines, payment policies and procedures, utilization management, and oversight that allows for the individual member's medical needs to be met during this review.
- d. T/RBHAs shall review requests for the use of a new technology and inform the requestor of the coverage decision within the timeframes specified by their internal technology policy for standard and time sensitive requests.
- e. Discussion reflecting consideration of a new FDA approved technology, including the usage of a new application for established technology and the T/RBHAs determination of coverage shall be documented in the Pharmacy and Therapeutics Committee meeting minutes and the Medical Management Committee meeting minutes.
- f. Consideration for systemic implementation of the coverage of the technology will be prioritized for consideration by ADHS/DBHS based on trends and the meta-analysis of peer reviewed literature as funding allows.

3.29.4 References

The following citations can serve as additional resources for this content area:

[A.R.S. §9-22-201](#)

[AHCCCS/ADHS Contract](#)

[ADHS/RBHA Contracts](#)

[ADHS Tribal IGAs](#)

[AHCCCS Medical Policy Manual, Chapter 1000, Policy 1020](#)

[ADHS/DBHS Annual Medical Management/Utilization Management Plan](#)

3.29.5 PM Forms

None

3.29.6 PM Attachments

None

