Section 7.10  Showing Report

7.10.1  Introduction

To ensure a Quarterly Showing Report is received from each Tribal or Regional Behavioral Health Authority (T/RBHA) in accordance with ADHS/RBHA contracts and ADHS/TRBHA Intergovernmental Agreements (IGAs).

7.10.2  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:

Certification of Need (CON)

Recertification of Need (RON)

7.10.3  Procedures

a. A “showing report” is a report that demonstrates compliance with federal requirements related to Certification of Need (CON) and Recertification of Need (RON) for RBHA authorized services including hospitals and behavioral health inpatient facilities.

b. The T/RBHA must:
   i. Complete the Quarterly Showing Report Certification form NARBHA Policy Form 7.10.1, including the signature of the T/RBHA’s Medical Director or Chief Executive Officer.
   ii. Review and attest to the validity of the Quarterly Showing Report.

c. Regional Behavioral Health Authorities (RBHAs) shall submit a Quarterly Showing Report to the Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS). The report shall demonstrate compliance with federal CON and RON requirements.

d. ADHS/DBHS will:
   i. Complete showing report requirements related to TRBHAs.
   ii. Submit the following documents to the Arizona Health Care Cost Containment System (AHCCCS) in accordance with the AHCCCS/ADHS Contract:
      1. A Showing Report Certification form from each T/RBHA. (See NARBHA Policy Form 7.10.1),
2. A cover letter signed by the ADHS/DBHS Deputy Director or designee and the ADHS/DBHS Chief Medical Officer that includes the following information:
   a. A certification that for the previous quarter, methods and procedures existed to ensure that federal requirements for CON and RON were met,
   b. A statement that a certification submitted by each T/RBHA is attached to the cover letter, and
   c. A statement identifying that each T/RBHA either had no errors or the number of Title XIX and Title XXI errors for each T/RBHA.

7.10.4 References
The following citations can serve as additional resources for this content area:
42 C.F.R. § 456.650
AHCCCS/ADHS Contract
ADHS/RBHA Contracts
ADHS/TRBHA IGAs

7.10.5 PM Forms
7.10.1 Policy Form Quarterly Showing Report Certification

7.10.6 PM Attachments
None

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Signature on file                Date
Mary Jo Gregory                            Teresa Bertsch, MD
President and Chief Executive Officer    Chief Medical Officer

Reference ADHS/DBHS Policy 1102