320-P  SERIOUS MENTAL ILLNESS ELIGIBILITY DETERMINATION

EFFECTIVE DATE: October 1, 2019

This policy applies to the Division of Developmental Disabilities’ (Division) Administrative Services Subcontractors (AdSS). The Division contracts with the AdSS and delegates the responsibilities of implementing this policy. The Division provides oversight and monitoring of delegated duties.

Policy Overview

A critical component of the AHCCCS delivery system is the effective and efficient identification of individuals who have behavioral health needs due to the severity of their behavioral health disorder. One such group is individuals determined to have a serious mental illness (SMI). Without receipt of the appropriate care, these individuals are at high risk for further deterioration of their physical and mental condition, increased hospitalizations, and potential homelessness and incarceration. To ensure that individuals who may have an SMI are promptly identified and evaluated, AHCCCS has established a standardized process for the referral, evaluation and determination of SMI eligibility as set forth in this Policy. The Division has adopted Exhibits from AHCCCS AMPM Policy 320-P for use by the AdSS.

Definitions

**Assessment:** The ongoing collection and analysis of an individual’s medical, psychological, psychiatric and social conditions in order to initially determine if a health disorder exists, if there is a need for behavioral health services, and on an ongoing basis ensure that the individual’s service plan is designed to meet the individual’s (and family’s) current needs and long term goals.

**Evaluation:** The process of analyzing current and past treatment information, including assessment, treatment, other medical records and documentation, for purpose of determining an individual’s eligibility for SMI services.

**Day:** Computation of Time as defined in A.A.C. R9-21-103.

**Determining Entity:** The AHCCCS designee authorized to make the determination of SMI eligibility.

**Serious Mental Illness:** A designation as defined in A.R.S. §36-550 and determined in an individual 18 years of age or older.

**Seriously Mentally Ill (SMI):** Individuals who, as a result of a mental disorder as defined in A.R.S. 36-501, exhibit emotional or behavioral functioning that is so impaired as to interfere substantially with their capacity to remain in the community without supportive treatment or services of a long-term or indefinite duration. In these individuals’ mental disability is severe and persistent, resulting in a long-term limitation of their functional capacities for primary activities of daily living such as interpersonal relationships, homemaking, self-care, employment and recreation.

**SMI Determination:** A determination as to whether or not an individual meets the diagnostic
and functional criteria established for the purpose of determining an individual’s eligibility for SMI services.

**SMI Decertification:** The process that results in a modification to a member’s medical record by changing the behavioral health category designation from SMI to General Mental Health.

**A. General Requirements**

1. All individuals must be evaluated for SMI eligibility by a qualified clinician, as defined in A.A.C. R9-21-101(B), and have an SMI Determination made by the Determining Entity if:
   
a. The individual makes such a request;
   
b. A guardian/legal representative, who is authorized pursuant to A.R.S. 14-5312, makes a request on behalf of the individual;
   
c. An Arizona Superior Court issues an order instructing that an individual is to undergo an SMI Evaluation/determination; or
   
d. A member is at least the age of 17.5. (Refer to AHCCCS Transition to Adulthood Practice Tool 8.0.)

2. The SMI eligibility evaluation record must contain all documentation considered during the review, including but not limited to, current and/or historical treatment records. The record may be maintained in either hardcopy or electronic format. The AdSS shall develop and make available to providers any requirements or guidance on SMI eligibility evaluation record location and/or maintenance.

3. Computation of time is as follows:
   
a. Day Zero: The day the initial assessment is completed by a qualified clinician, regardless of time of the assessment;
   
b. Day One: The next business day after the initial assessment is completed. The individual or organization completing the initial assessment must provide it to the Determining Entity as soon as practicable, but no later than 11:59 pm on Day One;
   
c. Day Three: The third business day after the initial assessment is completed. The Determining Entity shall have at least two business days to complete the final SMI Determination, but the final SMI Determination must be completed no later than Day Three; and
   
d. Determination Due Date: Day Three, three business days after Day Zero, excluding weekends and holidays, and is the date that the determination decision must be rendered. This date may be amended if an extension is approved in accordance with this policy.
B. Process for Completion of Initial SMI Evaluation

1. Upon receipt of a request, referral, or identification of the need for an SMI Determination, the AdSS will schedule an appointment for an initial meeting with the individual and a qualified clinician. This shall occur no later than seven business days after receiving the request or referral.

2. For referrals seeking an SMI eligibility determination for individuals admitted to a hospital for psychiatric reasons the entity scheduling the evaluation shall ensure that documented efforts are made to schedule a face-to-face SMI assessment with the member while hospitalized.

3. During the initial SMI evaluation meeting with the individual and qualified clinician, the clinician must:
   a. Make a clinical judgement as to whether the individual is competent enough to participate in an Evaluation;
   b. Obtain written consent to conduct the assessment from the individual or, if applicable, the individual’s guardian, unless the individual is under court-ordered evaluation as part of court-ordered treatment proceedings;
   c. Provide the individual and, if applicable, the individual’s guardian, the information required in A.A.C. R9-21-301(D)(2), a client rights brochure, and the appeal notice required by A.A.C. R9-21-401(B);
   d. Obtain authorization for the release of information, if applicable, (see AMPM Policy 550) for any documentation that would assist in the determination of the individual’s eligibility for SMI services;
   e. Conduct an assessment if one has not been completed within the last six months;
   f. Complete the SMI Determination Form (see AMPM 320-P Attachment A; and
   g. Upon completion of the initial SMI evaluation, submit all information to the Determining Entity within one business day.

C. Criteria for SMI Eligibility

1. The final determination of SMI requires both a qualifying SMI diagnosis and functional impairment because of the qualifying diagnosis (see AMPM 320-P Attachment B for qualifying diagnoses).

2. To meet the functional criteria for SMI status, an individual must have, as a result of a qualifying SMI diagnosis, dysfunction in at least one of the four domains described below for most of the past twelve months or for most of the past six months with an expected continued duration of at least six months:
   a. Inability to live in an independent or family setting without
supervision. Neglect or disruption of ability to attend to basic needs. Needs assistance in caring for self. Unable to care for self in safe or sanitary manner. Housing, food and clothing must be provided or arranged for by others. Unable to attend to the majority of basic needs of hygiene, grooming, nutrition, medical and dental care. Unwilling to seek prenatal care or necessary medical/dental care for serious medical or dental conditions. Refuses treatment for life threatening illnesses because of behavioral health disorder;

b. A risk of serious harm to self or others. Seriously disruptive to family and/or community. Pervasively or imminently dangerous to self or others’ bodily safety. Regularly engages in assaultive behavior. Has been arrested, incarcerated, hospitalized or at risk of confinement because of dangerous behavior. Persistently neglectful or abusive towards others in the individual’s care. Severe disruption of daily life due to frequent thoughts of death, suicide, or self-harm, often with behavioral intent and/or plan. Affective disruption causes significant damage to the individual’s education, livelihood, career, or personal relationships;

c. Dysfunction in role performance. Frequently disruptive or in trouble at work or at school. Frequently terminated from work or suspended/expelled from school. Major disruption of role functioning. Requires structured or supervised work or school setting. Performance significantly below expectation for cognitive/developmental level. Unable to work, attend school, or meet other developmentally appropriate responsibilities;

d. Risk of Deterioration. If an individual does not meet any one of the above functional criteria, and is expected to deteriorate to such a level without treatment, SMI eligibility may be established based on any of the following criteria:

i. A qualifying diagnosis with probable chronic, relapsing and remitting course;

ii. Co-morbidities (e.g., developmental/intellectual disability, substance use disorder, personality disorders);

iii. Persistent or chronic factors such as social isolation, poverty, extreme chronic stressors (e.g., life-threatening or debilitating medical illnesses, victimization); or

iv. Other (e.g., past psychiatric history, gains in functioning have not solidified or are a result of current compliance only, court-committed, care is complicated and requires multiple providers).

3. The following reasons are not sufficient alone for denial of SMI eligibility:

a. An inability to obtain existing records or information; or
b. Lack of a face-to-face psychiatric or psychological evaluation.

**D. Process for Completion of Final SMI Determination**

1. The AdSS shall develop policies and procedures that describe the providers’ requirements for submitting the Evaluation Packet and providing additional clinical information in order for the Determining Entity to make the final SMI eligibility determination.

2. If the Determining Entity requires additional information to make a final SMI eligibility determination, the AdSS shall ensure that evaluating agencies respond to the Determining Entity within three business days of the request for information.

3. The licensed psychiatrist, psychologist or nurse practitioner designated by the Determining Entity will make a final determination as to whether the individual meets the eligibility requirements for SMI status based on:
   a. A face-to-face assessment or reviewing a face-to-face assessment by a qualified clinician; and
   b. A review of current and historical information, if any, obtained orally or in writing by the assessor from collateral sources, and/or present or previous treating clinicians.

4. The following shall occur if the designated reviewing psychiatrist, psychologist or nurse practitioner has not conducted a face-to-face assessment and has a disagreement with the current evaluating or treating qualified behavioral health professional or behavioral health technician that cannot be resolved by oral or written communication:
   a. Disagreement regarding diagnosis: Determination that the individual does not meet eligibility requirements for SMI status must be based on a face-to-face diagnostic evaluation conducted by a designated psychiatrist, psychologist or nurse practitioner. The resolution of (specific reasons for) the disagreement must be documented in the individual’s comprehensive clinical record.
   b. Disagreement regarding functional impairment: Determination that the individual does not meet eligibility requirements must be documented by the psychiatrist, psychologist or nurse practitioner in the individual’s comprehensive clinical record to include the specific reasons for the disagreement and will include a clinical review with the qualified clinician.

5. If there is sufficient information to determine SMI eligibility, the individual shall be provided written notice of the SMI eligibility determination within three business days of the initial meeting with the qualified clinician in accordance with this Policy.
E. **Issues Preventing Timely Completion of SMI Eligibility Determination**

**Extending Completion of SMI Eligibility Time Period**

1. The time to initiate or complete the SMI eligibility determination may be extended no more than 20 calendar days if the individual agrees to the extension and:

   a. There is substantial difficulty scheduling a meeting in which all necessary participants can attend;

   b. The individual fails to keep an appointment for assessment, evaluation or any other necessary meeting;

   c. The individual is capable of, but temporarily refuses to cooperate in the preparation of the completion of an assessment or evaluation;

   d. The individual or the individual's guardian and/or designated representative requests an extension of time;

   e. Additional documentation has been requested but not received; or

   f. There is insufficient functional or diagnostic information to determine SMI eligibility within the required time periods.

**NOTE:** Insufficient diagnostic information shall be understood to mean that the information available to the reviewer is suggestive of two or more equally likely working diagnoses, only one of which qualifies as SMI, and an additional piece of existing historical information or a face-to-face psychiatric evaluation is likely to support one diagnosis more than the other(s).

2. The Determining Entity must:

   a. Document the reasons for the delay in the individual’s eligibility determination record when there is an administrative or other emergency that will delay the determination of an SMI status, and

   b. Not use the delay as a waiting period before determining an SMI status or as a reason for determining that the individual does not meet the criteria for SMI eligibility (because the determination was not made within the time standards).

3. In situations in which the extension is due to insufficient information:

   a. The Determining Entity shall request and obtain the additional documentation needed (e.g., current and/or past medical records) and/or perform or obtain any necessary psychiatric or psychological evaluations;

   b. The designated reviewing psychiatrist, psychologist or nurse practitioner must communicate with the individual’s current treating clinician, if any, prior to the determination of an SMI, if there is insufficient information to determine the individual’s level of functioning; and
c. SMI eligibility must be determined within three days of obtaining sufficient information, but no later than the end date of the extension.

4. If the evaluation or information cannot be obtained within the required time period because of the need for a period of observation or abstinence from substance use in order to establish a qualifying mental health diagnosis, the individual shall be notified by the Determining Entity that the determination may, with the agreement of the individual, be extended for up to 90 calendar days for an Extended Evaluation Period. This is a 90-day period of abstinence from drug and/or alcohol use in order to help the reviewing psychologist make an informed decision regarding SMI eligibility.

This extension may be considered a technical re-application to ensure compliance with the intent of A.A.C. R9-21-303; however, the individual does not need to actually reapply. Alternatively, the determination process may be suspended and a new application initiated upon receipt of necessary information.

5 If the individual refuses to grant an extension, SMI eligibility must be determined based on the available information. If SMI eligibility is denied, the individual will be notified of his/her appeal rights and the option to reapply in accordance with this Policy.

F. Notification of SMI Eligibility Determination

1. If the individual is determined SMI, the SMI status must be reported to the individual or legal guardian, by the Determining Entity, in writing, including notice of the individual’s right to appeal the decision.

2. If the eligibility determination results in a denial of SMI status, the Determining Entity must provide written notice of the decision and include:
   a. The reason for denial of SMI eligibility,
   b. The right to appeal, and
   c. The statement that individuals who are ALTCS eligible will continue to receive needed ALTCS covered services. In such cases, the individual’s behavioral health category assignment must be assigned based on criteria in the AHCCCS Technical Interface Guidelines.

G. Re-enrollment or Transfer

1. If the individual’s status is SMI at disenrollment or transition to another AdSS or acute contractor, the individual's status shall continue as SMI.

2. An individual shall retain his/her SMI status unless a determination is made by a Determining Entity that the individual no longer meets criteria.

H. Review of SMI Eligibility

1. The AdSS must indicate in policies and procedures made available to their providers the process for reviewing an SMI eligibility determination.
2. The AdSS may seek a review of an individual’s SMI eligibility from the Determining Entity:
   a. As part of an instituted, periodic review of all individuals determined to have an SMI;
   b. When there has been a clinical assessment that supports that the individual no longer meets the functional and/or diagnostic criteria; or
   c. As requested by a member, who has been determined to meet SMI eligibility criteria, or his/her legally authorized representative.

3. A review of the determination may not be requested by the AdSS or their contracted behavioral health providers within six months from the date an individual has been determined SMI eligible.

I. SMI Decertification

There are two established methods for removing an SMI designation, one clinical and the other an administrative option, as follows:

1. A member who has an SMI designation or an individual from the member’s clinical team may request an SMI Clinical Decertification from the AHCCCS designee that conducts SMI Determinations. An SMI Clinical Decertification is a determination that a member who has an SMI designation no longer meets SMI criteria. If, as a result of a review, the individual is determined to no longer meet the diagnostic and/or functional requirements for SMI status:
   a. The Determining Entity must ensure that written notice of the determination and the right to appeal is provided to the affected individual with an effective date of 30 calendar days after the date the written notice is issued, and
   b. The AdSS must ensure that services are continued if an appeal is timely filed, and that services are appropriately transitioned as part of the discharge planning process.

2. A member who has an SMI designation may request an SMI Administrative Decertification from AHCCCS, DHCM, and Clinical Resolution Unit if the member has not received behavioral health services for a period of two or more years.
   a. Upon receipt of a request for Administrative Decertification, the AdSS shall direct the member to contact AHCCCS, DHCM, Customer Service, and
   b. AHCCCS will evaluate the member’s request and review data sources to determine the last date the member received a behavioral health service. AHCCCS will inform the member of changes that may result with the removal of the member’s SMI designation. Based upon review, the following will occur:
i. If the member has not received a behavioral health service within the previous two years, the member will be provided with AMPM 320-P Attachment C. This form must be completed by the member and returned to AHCCCS; or

ii. If the review finds that the member has received behavioral health services within the prior two-year period, the member will be notified that he/she may seek Decertification of his/her SMI status through the Clinical Decertification process.