

320-R SPECIAL ASSISTANCE FOR MEMBERS WITH SERIOUS MENTAL ILLNESS

EFFECTIVE DATE: October 1, 2019

REFERENCES: AMPM Policy 1040 ; AMPM 320-R Attachment A; A.R.S. §§ 14-5304, 36-107, 36-501, 36-504, 36-509, 36-517.01, 41-3803, and 41-3804; 9 A.A.C 21

DELIVERABLES: Members Determined to Have SMI Receiving Special Assistance

This policy applies to the Division Administrative Services Subcontractor (AdSS). The Division's AdSS must identify and report, to the Division, persons determined to have a Serious Mental Illness (SMI) and meet the criteria for Special Assistance.

If the person's Special Assistance needs appear to be met by an involved family member, friend, designated representative, or guardian:

- A. The AdSS, or a behavioral health provider, must still submit a notification to the Division.
- B. The AdSS, must ensure that the person designated to provide Special Assistance is involved at key stages.

Purpose

The purpose of this policy is to establish uniform guidelines for:

- A. Identifying persons determined to have a Serious Mental Illness (SMI) who are in need of Special Assistance
- B. Ensuring that persons in need of Special Assistance have their Special Assistance needs met
- C. Maintaining and disseminating required reports on persons in need of Special Assistance.

The AdSS must ensure that all subcontracted providers adhere to the requirements of this policy.

General Requirements

- A. Criteria to deem a person to be in need of Special Assistance are as follows:
 1. A person determined to have a Serious Mental Illness (SMI) is in need of Special Assistance if he/she is also unable to do any of the following:
 - a. Communicate preferences for services.
 - b. Participate effectively in Planning Meetings, or Inpatient Treatment Discharge Planning (ITDP).
 - c. Participate effectively in the appeal, grievance or investigation processes.

- d. The member's limitations described in a.-c. above must also be due to any of the following:
 - i. Cognitive ability/intellectual capacity (i.e., cognitive impairment, borderline intellectual functioning, or diminished intellectual capacity)
 - ii. Language barrier (an inability to communicate, other than a need for an interpreter/translator)
 - iii. Medical condition (including, but not limited to traumatic brain injury, dementia, or severe psychiatric symptoms).
 2. A person who is subject to general guardianship has been found to be incapacitated under A.R.S. § 14-5304, and therefore automatically satisfies the criteria for Special Assistance.
- B. For a person determined to have an SMI, the existence of any of the following circumstances should prompt the AdSS to more closely review whether the person is in need of Special Assistance:
1. Developmental disability involving cognitive ability
 2. Residence in a 24 hour setting
 3. Limited guardianship, or the AdSS is recommending and/or pursuing the establishment of a limited guardianship
 4. Existence of a serious medical condition that affects his/her intellectual and/or cognitive functioning (such as, dementia or traumatic brain injury).
- C. Any of the following people may deem a person to be in need of Special Assistance:
1. A qualified clinician providing treatment for the person
 2. A Support Coordinator
 3. A clinical team of the AdSS
 4. The Division/Division Planning Team
 5. A program director of an AdSS-subcontracted provider (including the Arizona State Hospital [AzSH])
 6. The Deputy Director of AHCCCS or designee
 7. A hearing officer assigned to an appeal involving a person determined to have an SMI.

D. When to Screen for Special Assistance

The AdSS, and their subcontracted providers must, on an ongoing basis, screen whether persons determined to have an SMI are in need of Special Assistance in accordance with the criteria set out in the General Requirements section of this policy. Minimally, this must occur at the following stages:

1. Assessment and annual updates
2. Development of, or update to, the Behavioral Health Individual Service Plan (ISP)
3. Upon admission to a psychiatric inpatient facility
4. Development of, or update to, an Inpatient Treatment and Discharge Plan (ITDP)
5. Initiation of the grievance or investigation processes
6. Filing of an appeal
7. Existence of a condition that may be a basis for a grievance, investigation or an appeal.

Documentation

- A. The AdSS, and their subcontracted providers must document in the clinical record each time a staff member screens a person for Special Assistance, indicating the factors reviewed and the conclusion. If the conclusion is that the person is in need of Special Assistance, they must notify the Division, using AHCCCS Medical Policy Manual (AMPM) 320-R Attachment A, Notification of Member in Need of Special Assistance, as adopted by the Division, in accordance with the procedures below.
- B. Before submitting AMPM 320-R Attachment A, the AdSS, and their subcontracted providers must check if the person is already identified as in need of Special Assistance. A notation of Special Assistance designation and a completed AMPM 320-R Attachment A should already exist in the clinical record. However, if it is unclear, subcontracted providers must review data or contact the AdSS to inquire about current status.
- C. The AdSS are required to maintain a database on persons in need of Special Assistance and share data with providers on a regular basis (at a minimum quarterly).

Requirements to Notify the Division

- A. If a person is not correctly identified as Special Assistance, the AdSS, and their subcontracted providers, must submit Part A of AMPM 320-R Attachment A to the Division within five working days of identifying a person in need of Special Assistance. If the person has a Special Assistance need requiring immediate assistance, the notification form must be submitted immediately with a notation

- indicating the urgency. The AdSS and their subcontracted providers should inform the person of the notification and explain the benefits of having another person involved who can provide Special Assistance, if able.
- B. If the person is under a guardianship or one is in process, the documentation of such must also be submitted to the Division. However, if the documentation is not available at the time of submission of the AMPM 320-R Attachment A notification, the form should be submitted within the required timeframes, followed by submittal of the guardianship documentation.
 - C. The Division reviews the notification form to ensure that it contains sufficient information detailing the criteria and responds to the AdSS and their subcontracted providers by completing Part B of AMPM 320-R Attachment A within five working days of receipt of the form. If the necessary information is not provided on the form, the Division contacts the staff member submitting the notification for clarification. If the notification is urgent, the Division will respond as soon as possible, but generally within one working day of receipt of the notification.
 - D. The notification process is not complete until the Division completes Part B of the form and sends it back to the AdSS and its subcontracted providers. The AdSS and their subcontracted providers should follow up if no contact is made or if Part B is not received within five working days.
 - E. The Division designates which agency/person will provide Special Assistance when processing AMPM 320-R Attachment A. When the agency/person providing Special Assistance changes, the Division processes an "updated Part B" to document the change.
 - F. If the person or agency currently identified as providing Special Assistance is no longer actively involved, the Division must notify Division of Healthcare Care Advocacy & Advancement (DHCAA). If a DHCAA advocate is also assigned, notification to the advocate is sufficient.

Persons No Longer in Need of Special Assistance

- A. The AdSS or their subcontracted providers must notify the Division within 10 days of an event or determination that a person in need of Special Assistance no longer meets criteria by completing Part C of the original notification form (with Parts A and B completed when first identified), noting:
 1. The reason(s) why Special Assistance is no longer required
 2. The effective date
 3. The name, title, phone number and e-mail address of the staff person completing the form
 4. The date the form is completed.

- B. The following are instances that should prompt the AdSS or their subcontracted providers to submit a Part C:
1. The original basis for the person meeting Special Assistance criteria is no longer applicable and the person does not otherwise meet criteria.

The AdSS or their subcontracted provider must first discuss the determination with the person or agency providing Special Assistance to obtain any relevant input, and this includes when a person is determined to no longer be a person with an SMI (proper notice and appeal rights must be provided and the period to appeal must have expired).
 2. The person passes away.
 3. The person's episode of care is ended with the AdSS (on-Title XIX persons with an SMI will also be disenrolled) and the person is not transferred to another AdSS.
- C. The AdSS or their subcontracted providers must first perform all required re-engagement efforts, which includes contacting the person providing Special Assistance, per AMPM Policy 1040, Outreach, Engagement, Re-engagement and Closure for Behavioral Health. Proper notice and appeal rights must be provided and the period to appeal must have expired prior to submission of Part C.
- Note: Submission of a Part C is **not** needed when a person transfers to another AdSS, as the Special Assistance designation follows the person.
- D. Upon receipt of Part C of the AMPM 320-R Attachment A, the Division reviews content to confirm accuracy and completeness and returns it to the agency that submitted it, copying the AdSS or their subcontractors.

Requirement of the Division, its AdSSs, Subcontractors to Help Ensure the Provision of Special Assistance

- A. The AdSS or their subcontracted providers must maintain open communication with the person (e.g., guardian, family member, friend, advocate) assigned to meet the person's Special Assistance needs. Minimally, this involves providing timely notification to the person providing Special Assistance to ensure involvement in the following:
1. Behavioral Health ISP planning and review, which occurs in any instance when the person makes a decision regarding service options and/or denial/modification/termination of services (service options include not only a specific service but also potential changes to provider, site, and physician and case manager assignment).
 2. Behavioral Health ISP development and updates, which must be in accordance with 320-O, Service Planning, Assessments, and Discharge Planning in this Policy Manual.
 3. ITDP planning, which occurs any time a person is admitted to a psychiatric

inpatient facility and involvement throughout the stay and discharge.

4. Appeal process, which occurs in circumstances that may warrant the filing of an appeal, so all Notices Adverse Benefit Determination (NOA) or Notices of Decision (NOD) issued to the person/guardian must also be copied to the person designated to meet Special Assistance needs; and
 5. Investigation or Grievance, which occurs when an investigation/grievance is filed and circumstances when initiating a request for an investigation/grievance may be warranted.
- B. If such procedures are delayed in order to ensure the participation of the person providing Special Assistance, the AdSS, subcontracted providers must document the reason for the delay, in the clinical record or in the investigation, grievance or appeal file. If an emergency service is needed the AdSS, and/or their subcontracted providers must, ensure that the person receives the needed services in the interim and promptly notify the agency/person providing Special Assistance.
- C. The AdSS must timely provide relevant details and a copy of the original AMPM 320-R Attachment A (both Parts A and B) to the receiving entity when a person in need of Special Assistance is
1. Admitted to an inpatient facility
 2. Admitted to a residential treatment setting
 3. Transferred to a different AdSS.
- D. The AdSS must periodically review whether the person's needs are being met by the person or agency designated to meet the person's Special Assistance needs. If a concern arises, they should first address it with the person or agency providing Special Assistance. If the issue is not promptly resolved, they must take further action to address the issue, which may include contacting the Division for assistance.

AdSS Reporting Requirements

- A. The AdSS must maintain a copy of completed AMPM 320-R Attachment A, Parts A, B and updated if any.
- B. The AdSS must maintain a database on persons in need of Special Assistance to ensure compliance with this policy and the reporting requirements described in this section. This cannot be delegated to providers.
 - The AdSS must, by the 10th calendar day of each month, provide the Division Compliance Unit with a comprehensive report listing of all persons in need of Special Assistance who are active as of the end of the previous month
 - Any Part C notifications, during the previous month, that a person no longer needs Special Assistance
 - Any persons transferred, to the AdSS during the previous month, who were

Special Assistance in the previous contractor or Tribal Regional Behavioral Health Authority (TRBHA)

- Any person in need of Special Assistance who was transferred from the AdSS to another AdSS.

The monthly reports must contain the following information:

1. CIS Number
2. Name
3. Date of Birth
4. Guardian (yes or no)
5. Current address
6. Current phone number
7. Type of residence
8. Whether currently at AzSH and unit name
9. AzSH Identification Number
10. Name of Provider
11. Name/location of Provider site
12. Name of Case Manager
13. Name of Clinical Supervisor
14. Title XIX (AHCCCS) enrollment status (yes or no)
15. Effective Date (date Part B was completed)
16. Person/relationship or agency meeting Special Assistance needs
17. Name, address and phone number of person meeting the Special Assistance needs
18. If applicable, the Date of Discharge from AzSH
19. If applicable, the Date of the Removal (when Part C of the notification was sent to the Division) or the event and event date that prompted the removal
20. If applicable, information on any updated Part B (indicating change in person meeting needs), and
21. If applicable, the Date of the transfer including the name of the receiving contractor.

- C. By the 25th day of the month following the end of a quarter, the Division provides AdSS with a comprehensive report for the previous quarter.
- D. The AdSS, in response to the Division's quarterly report, must:
 - 1. Update the AdSS database with data updates contained in the quarterly report for persons assigned to an advocate.
 - 2. Submit an updated report to the Division by the 10th day of the next month. The report must identify any changes, in client information, for persons not assigned to an Advocate, that occurred during the previous quarter.

Examples include change in Title XIX enrollment, changes in the person's residence, case management provider or case manager assignment, etc. The AdSS and the Division must work together to rectify any data discrepancies in a timely manner to ensure that the data maintained is accurate.

- E. The Division, using data it maintains on all persons in need of Special Assistance, must provide a list of persons in each region to each Independent Oversight Committee (IOC) by the 25th calendar day of each month. The Division customarily provides a courtesy copy of the report.
- F. By the 10th calendar day of each month, AdSS must provide the Division with a comprehensive report listing of persons in need of Special Assistance that were receiving services at AzSH during the previous month. The Division provides the final report to the DDD IOC and a copy to the AdSS by the 25th of the month.
- G. AdSS must share Special Assistance data with its subcontracted providers that provide case management to persons determined to have an SMI and verify that a process exists at each case management provider to ensure this data is accessible by front-line provider staff (at a minimum quarterly). AdSS must also establish a process with such providers to obtain quarterly updates on persons currently identified as Special Assistance to support the AdSS . quarterly data updates process with the Division.

Confidentiality Requirements

- A. The AdSS and subcontracted providers must grant access to clinical records of persons in need of Special Assistance in accordance with federal and state confidentiality laws (see Division Medical Policy Manual 550).
- B. DDD IOCs and their members must safeguard the monthly list that contains the names of those persons in need Special Assistance regarding any Protected Health Information (PHI). IOCs must inform AHCCCS annually in writing of how it will maintain the confidentiality of the Special Assistance lists. If IOCs request additional information that contains PHI that is not included in the monthly report.

Other Procedures

- A. The AdSS must maintain a copy of the completed AMPM 320-R Attachment A, (Parts A and B and updated B, if any) in the person's comprehensive clinical record. If a person was identified as no longer needing Special Assistance and a Part C of the notification form was completed, the AdSS and subcontracted providers must maintain a copy of the form in the comprehensive clinical record.
- B. The AdSS must clearly document in the clinical record (i.e., on the assessment, ISP, ITDP, face sheet) and case management/client tracking system if a person is identified as in need of Special Assistance, the person assigned currently to provide Special Assistance, the relationship, contact information including phone number and mailing address.
- C. The DDD IOCs must make regular visits to the residential environments of persons in need of Special Assistance to determine whether the services meet their needs and their satisfaction with the residential environment.
- D. The AdSS must implement quality management measures to ensure the subcontracted providers implement the requirements of this policy. Audit tools and procedures must be shared with the Division prior to use to ensure they address:
 - 1. Screening requirements
 - 2. Documentation requirements
 - 3. Provisions of Special Assistance requirements.
- E. The AdSS must ensure that all applicable staff are trained regarding the requirements of Special Assistance (see Division Medical Policy Manual, Policy 1060).