

1290 BEHAVIORAL HEALTH ADVOCACY

EFFECTIVE DATE: July 19, 2023

REFERENCES: Behavioral Health Advocate Referral form (DDD-2093A),
Behavioral Health Advocacy Plan (DDD-2092A).

PURPOSE

This policy sets forth guidance on how the Division of Developmental Disabilities (Division) the Division provides support to members who experience unique challenges of navigating systems of care while experiencing behavioral health challenges. This policy outlines when and how referrals are made to an Adult or Child Behavioral Health Advocate, explains the development of a Behavioral Health Advocacy Plan.

DEFINITIONS

1. “Behavioral Health (BH) Advocate” means for the purpose of this policy a Division staff member whose role is to offer independent support to members and families who feel they are not being heard, ensuring they are taken seriously, and that their rights are respected.

2. “Human Rights Advocates” means for the purpose of this policy, AHCCCS staff who assist and advocate on behalf of members determined to have a Serious Mental Illness with Service Planning, Inpatient Discharge Planning, and resolving appeals and grievances. Staff in this position are hired, trained, supervised, and coordinated through the AHCCCS Office of Human Rights-Special Assistance.
3. “Member” means an individual who is receiving services from the Division of Developmental Disabilities (Division).
4. “Responsible Person” means the parent or guardian of a minor with a developmental disability, the guardian of an adult with a developmental disability or an adult with a developmental disability who is a member or an applicant for whom no guardian has been appointed.
5. “Special Assistance” means the support provided to a member designated as Seriously Mentally Ill who is unable to articulate treatment preferences and/or participate effectively in the development of the Service Plan, Inpatient Treatment, and Discharge Plan (ITDP), grievance and/or appeal processes due to

cognitive or intellectual impairment and/or medical condition.

Special Assistance is offered through the AHCCCS Office of Human Rights.

6. "Support Coordinator" means the same as "Case Manager" under A.R.S. § 36-551.

POLICY

A. ROLE OF A BH ADVOCATE

1. BH Advocates shall not represent their own views but amplify that of the person they are supporting.
2. BH Advocates shall offer support and guidance to assist members and their families to be empowered by having their voices heard and sharing in decisions regarding their health.
3. BH Advocates may work with a member for a short period of time to learn how to better advocate for themselves and navigate the Behavioral Health System. The BH Advocate has a non-adversarial role to support members and families to advocate for themselves through collaboration with system partners.

4. BH Advocates shall not perform the day-to-day duties of the Support Coordinator or the Behavioral Health Complex Care Specialist, however, the BH Advocates work closely with the Support Coordinator and the Planning Team to ensure the voice and expressed choices of the Member or Responsible Person is being heard, and barriers are being resolved so member's behavioral health needs are met.

B. REFERRALS FOR A BEHAVIORAL HEALTH ADVOCATE

1. The Support Coordinator shall review the need for a BH Advocate at the Planning Meeting for Division members of all eligibility types.
 - a. The Support Coordinator shall attempt to advocate on behalf of the member and resolve a member's behavioral health care needs with the Division's function areas, the Health Plan, and providers before submitting a BH Advocate referral.
 - b. Referrals for BH Advocates shall be made within three business days of an identified need for an Advocate.

2. The Support Coordinator or designee shall make a referral for a BH Advocate when:

- a. A member is exhibiting symptoms of a possible behavioral health disorder and may be in need of behavioral health services, or
- b. A member is diagnosed with a behavioral health disorder and the member or Responsible Person is willing to accept the assistance from an Advocate.
- c. Additionally, one of the following circumstances shall exist that impact the member's ability to receive needed care.

The member or responsible person:

- i. Feels their voice is not being heard or their choice is not being respected regarding their behavioral health service needs.
- ii. Feels they are not actively involved in the service planning process.
- iii. Has limitations in the ability to communicate their

- behavioral health needs.
- iv. Is unable or does not know how to advocate for themselves and would benefit from advocacy services.
 - v. May need assistance in navigating the behavioral health or other service systems of care.
 - vi. May need assistance in understanding the behavioral health grievance process.
3. The Division shall accept a request from a Responsible Person for a BH Advocate through:
- a. Contacting the Member's Support Coordinator; or
 - b. Calling the Customer Service Center.
4. The Support Coordinator shall not make a referral for a BH Advocate through the Division's Office of Individual and Family Affairs (OIFA) when a member is assigned a BH Human Rights Advocate through the AHCCCS Office of Human Rights-Special Assistance, however, the BH Human Rights Advocate through the AHCCCS Office of Human Rights-Special Assistance may request to collaborate with a BH Advocate through the Division to assist

with meeting the member's needs.

5. The Support Coordinator may make a referral if a member has a guardian, and the guardian is willing to accept assistance from an Advocate.

C. BH ADVOCATE ASSIGNMENT

1. Division staff from other functional areas such as the Behavioral Health Administration, Nursing, OIFA, Support Coordination, or State Operations shall discuss an identified need for a BH Advocate with the Support Coordinator.
2. The BH Advocacy Supervisor shall request additional information if needed, to determine if a BH Advocate shall be assigned.
3. A BH Advocate shall contact the Responsible Person upon approval, to discuss the need for advocacy if the member is approved to receive a BH Advocate.
4. The Support Coordinator may request the OIFA Administrator to review the BH Advocate referral if a Member was denied a BH Advocate.

D. BEHAVIORAL HEALTH ADVOCACY PLAN

1. The BH Advocate shall contact the responsible person within three business days of approval for a BH Advocate, to discuss the Member's need for this support, and begin working on developing the Advocacy Plan by:
 - a. Reviewing:
 - i. Reasons for the BH Advocate request outlined in the referral, and
 - ii. The Member's BH goals outlined in the Planning Document.
 - b. Discussing with the Responsible Person the reason for the BH Advocate referral and goal(s) to be accomplished working towards ensuring the member's behavioral health needs are met.
 - c. Developing action plan tasks, including:
 - i. Persons involved with actions taken,
 - ii. Targeted dates for task completion, and

iii. Dates of meetings the BH Advocate shall attend with the Member.

d. Discussing a targeted goal(s) for when BH Advocacy is no longer needed.

E. SUPPLEMENTAL INFORMATION

1. BH Advocate Roles and Responsibilities:

a. The BH Advocate shall contact the BH Complex Care Specialist, if one is assigned, to state the purpose of the BH Advocate involvement and to gather pertinent historical information.

b. Build relationships and knowledge of community resources in order to:

i. Support the member, and their family if applicable, to obtain and maintain needed services, including but not limited to Peer and Family Support Services when appropriate.


ii. Increase awareness of community resources for

children and adults and promote recovery, resilience, and wellness.

- iii. Identify opportunities to inform and connect those seeking assistance to access programs and services to meet identified needs.

2. Support Coordinator Roles and Responsibilities:

- a. Advocate for the member and continue to maintain the role of the member's primary case manager.
- b. Identify when a member could benefit from a BH Advocate and inform the member how an Advocate can provide support.
- c. Invite the BH Advocate to the Planning Meetings.
- d. Maintain communication of any substantial changes that would impact the advocacy plan with the BH Advocate.

Signature of Chief Medical Officer: 
[Anthony Dekker \(Jul 13, 2023 09:04 PDT\)](#)
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