

590 BEHAVIORAL HEALTH CRISIS SERVICES AND CARE COORDINATION

EFFECTIVE DATE: January 18, 2023

REFERENCES: AHCCCS Contract

PURPOSE

This policy describes the requirements related to the behavioral health Crisis system for Arizona Long Term Care System (ALTCS) eligible members.

DEFINITIONS

1. “Crisis” means an acute, unanticipated, or potentially dangerous behavioral health condition, episode, or behavior. A Crisis is self-defined and determined by the individual experiencing the situation. An individual is in Crisis if the individual finds they lack the skills or are unable to cope with a situation or event that is impacting them.
2. “Crisis Services” means services that are community based, recovery-oriented, and member-focused that shall work to stabilize members as quickly as possible so as to assist them in returning to their baseline of functioning.

3. "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.
4. "Support Coordinator" means the same as "Case Manager" under A.R.S. § 36-551.

POLICY

- A.** The Division shall ensure medically necessary services and care are provided to members following a Crisis episode or discharge from a crisis stabilization setting.
- B.** The Division shall be financially responsible for services after the initial 24 hours of a Crisis episode, which is covered by the AHCCCS Complete Care Regional Behavioral Health Authority (ACC-RBHA), or discharge from a Crisis stabilization setting, whichever occurs first.
- C.** The Division shall ensure emergency transportation from Crisis receiving facilities is covered as a health plan benefit.
- D.** The Division shall ensure non-emergent transportation from Crisis receiving facilities is covered as a health plan benefit for members not

residing in community residential settings and Intermediate Care Facilities for the Intellectually Disabled.

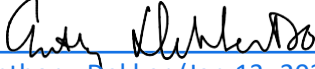
- E.** The Division shall ensure community residential settings and Intermediate Care Facilities for the Intellectually Disabled provide non-emergent transportation from Crisis receiving facilities for members residing in those settings.
- F.** The Division shall publicize Crisis Services, including the statewide Crisis phone number, prominently on their websites, in their resource directories, and on the following relevant member and community materials:
1. Division website,
 2. Member handbook, and
 3. Member identification cards.
- G.** The Division shall ensure care coordination occurs between:
1. The member's health plan;
 2. Behavioral health provider;
 3. The Division;
 4. Crisis providers; and
 5. The member, if applicable.

- H.** The Support Coordinator shall follow up with the Responsible Person within two business days from receiving the focus global notification to gather information regarding what event occurred before the Crisis line was called and assess the following:
1. Whether additional support is needed from either the Division or behavioral health provider.
 2. Whether the member is receiving the appropriate behavioral health services and:
 - a. Make a referral within one business day, if needed; or
 - b. Advocate if additional behavioral health services are needed.
- I.** The Support Coordinator shall:
1. Ensure all planning team members and/or Child and Family Team/Adult Recovery Team are aware of recent contact with behavioral health Crisis services.
 2. Coordinate care with the planning team and/or Child and Family Team/Adult Recovery Team as needed to:
 - a. Verify medications are taken as prescribed,

- b. Verify the member is currently enrolled with a behavioral health provider,
 - c. Assess for additional behavioral health services, and
 - d. Ensure the member has a Crisis plan and/or update plan for current needs.
 3. Request assistance from the District Behavioral Health Complex Care Specialist as needed.
 4. Submit a referral to the Division's Behavioral Health Advocate as needed.
 5. Request assistance from the District Nurse if medical concerns are presented.
 6. Complete a referral for a Care Manager through the member's ALTCS health plan as needed.
- J.** The Division shall ensure the Administrative Services Subcontractors (AdSS) develop policies establishing post-Crisis care coordination expectations that provide the following:
1. Transfer of medical records of services received during a Crisis episode, including prescriptions.

2. Tracking of admission, discharge, and re-admissions, including admission setting.
 3. Requirements for follow-up directly with the individual, within 72 hours, when discharged from a Crisis setting.
 4. Engagement of peer and family support services when responding to post-Crisis situations.
 5. The provision of ongoing care is done in an expedient manner in accordance with ACOM Policy 417.
- K.** The Division shall ensure the AdSS regularly evaluates post-Crisis care coordination activities and work to improve internal and external collaboration efforts. Care coordination activities shall include use of Health Information Technology, as available, to improve member outcomes.
- L.** The Division shall oversee the AdSS utilizing the following methods to ensure compliance with policy:
1. Annual Operational Review of each AdSS,
 2. Review and analyze deliverable reports submitted by the AdSS, and
 3. Conduct oversight meetings with the AdSS for the purpose of:

- a. Reviewing compliance,
- b. Addressing concerns with access to care or other quality of care concerns,
- c. Discussing systemic issues, and
- d. Providing direction or support to the AdSS as necessary.

Signature of Chief Medical Officer: 
[Anthony Dekker \(Jan 13, 2023 11:13 MST\)](#)
Anthony Dekker, D.O.