

1620-G BEHAVIORAL HEALTH STANDARDS

REVISION DATES: 4/9/2025, 12/22/2021, 3/3/2021

REVIEW DATES: 8/6/2024, 11/10/2023

EFFECTIVE DATE: May 13, 2016

REFERENCES: A.A.C. R4-6-101, R9-10-101(25); Division Medical Policy 320-P; Division Operations Policy 417

PURPOSE

This policy applies to the Division of Developmental Disabilities (Division) and establishes behavioral health standards for Members enrolled with Arizona Long-Term Care System (ALTCS) and needing or receiving behavioral health services.

DEFINITIONS

1. "Behavioral Health Professional" or "BHP" means:
 - a. An individual licensed under A.R.S. Title 32, Chapter 33, whose scope of practice allows the individual to:
 - i. Independently engage in the practice of behavioral health as defined in A.R.S. §32-3251; or
 - ii. Except for a licensed addiction technician, engage in the practice of behavioral health as defined in A.R.S. § 32-3251 under direct supervision as defined in

A.A.C. R4-6-101;

- b. A psychiatrist as defined in A.R.S. §36-501;
 - c. A psychologist as defined in A.R.S. §32-2061;
 - d. A physician;
 - e. A behavior analyst as defined in A.R.S. §32-2091;
 - f. A registered nurse practitioner licensed as an adult psychiatric and mental health nurse; or
 - g. A registered nurse with a psychiatric-mental health nursing certification or one year of experience providing behavioral health services.
2. "Member" means a person receiving developmental disabilities services from the Division as defined in A.R.S. § 36-551.
 3. "Planning Team" means a defined group of individuals comprised of the Member, the Responsible Person if other than the Member, and, with the Responsible Person's consent, any individuals important in the Member's life, including extended family members, friends, service providers, community resource providers, representatives from religious/spiritual organizations, and agents from other service systems.
 4. "Qualified Clinician" means a behavioral health professional who

is licensed or certified under A.R.S. Title 32 or a behavioral health technician who is supervised by a licensed or certified behavioral health professional.

5. "Referral" means providing an individual with a list of the class or subclass of health care institution or type of health care professional that may be able to provide the behavioral health services or physical health services that the individual may need and may include the name or names of specific service providers.
6. "Responsible Person" means an adult with a developmental disability who is a Member or an applicant for whom no guardian has been appointed, the parent or guardian of a minor with a developmental disability, or the guardian of an adult with a developmental disability.
7. "Support Coordination" means a collaborative process which assesses, plans, implements, coordinates, monitors, and evaluates options and services to meet an individual's health needs through communication and available resources to promote quality, cost-effective outcomes.
8. "Support Coordinator" means the same as "Case Manager" under A.R.S. § 36-551.

POLICY

A. INITIATING BEHAVIORAL HEALTH SERVICES

1. If a Support Coordinator receives a request for behavioral health services from a Responsible Person, the Support Coordinator shall assist the Responsible Person with a Referral to a behavioral health provider for an initial assessment.
2. If a Support Coordinator identifies the need for behavioral health services, and with the Responsible Person's consent to those services, the Support Coordinator shall assist the Responsible Person with a Referral to a behavioral health provider for an initial assessment.
3. The Support Coordinator shall assist with a Referral to a behavioral health provider within one business day from the date the request for behavioral health services was received or the need identified.
4. The Support Coordinator shall coordinate with the Member's behavioral health provider for a referral to a Qualified Clinician for assessment and evaluation when the Planning Team has identified the potential need for a serious mental illness or serious emotional disturbance eligibility determination as

specified in A.A.C. R9-21-101(B).

B. BEHAVIORAL HEALTH SERVICES

1. The Support Coordinator shall collaborate with the behavioral health provider to ensure behavioral health services are received in accordance with Behavioral Health Appointment Standards as specified in Division Operations Policy 417.
2. The Support Coordinator shall assist with the coordination of care between the Member's primary care provider and behavioral health providers involved in the Member's care, and that care is coordinated with other agencies or other providers involved in the Member's care.
3. If a Member is exhibiting new or existing challenging behaviors, and additional or new interventions may be warranted to support the Member in the current setting, the Support Coordinator shall arrange for a BHP to assess, develop a care plan, and preserve the current placement if possible.
4. Support Coordination for a Member receiving behavioral health services shall be provided in consultation with a qualified BHP in those cases where the Support Coordinator does not meet the qualifications of a BHP as defined in A.A.C. R9-10-101.

- a. The consultation does not have to be with the provider of behavioral health services.
 - b. The consultation may be with the Division's Behavioral Health Administrator or other qualified BHP within the Division.
5. The Support Coordinator shall make contact with the BHP prior to the initial behavioral health consultation for all Members receiving or needing behavioral health services.
6. At a minimum, the Support Coordinator shall have quarterly discussions with the BHP as long as the Member continues to receive behavioral health services.
7. The Support Coordinator shall not be required to have quarterly discussions for Members who are stable on psychotropic medications or Members who are not receiving any behavioral health services other than medication management.
8. The Support Coordinator shall document the content and results of the initial consultation and quarterly discussions with the BHP in the Member's case file.
 - a. The discussion is a communication between the Support Coordinator and a BHP regarding the Member's status and

- plan of treatment.
- b. A report received from the BHP and placed in the Member's case file by the Support Coordinator does not meet the requirements for the initial consultation or quarterly discussions between the Support Coordinator and the BHP
9. As part of the planning meeting the Support Coordinator shall:
- a. Review the psychotropic medications being taken by the Member and include the purpose of the medication, the effectiveness of the medication, and any adverse side effects that may have occurred; and
 - b. Document any concerns discussed and develop a plan of action to resolve those concerns.
10. The Support Coordinator shall identify, assist with, and monitor the special needs and requirements related to Members who are unable or unwilling to consent to court-ordered treatment and document these activities in the Member's case file.
11. The Support Coordinator shall ensure the behavioral health code in Focus is correct at the time of each planning meeting.

Anthony Dekker

Signature of Chief Medical Officer

Anthony Dekker

Name

Apr 4, 2025

Date