

## **320-Z MEMBERS ON CONDITIONAL RELEASE**

REVIEW DATE: 10/25/2024

EFFECTIVE DATE: August 30, 2023

REFERENCES: A.R.S. § 12-136; A.R.S. § 13- 3991; A.R.S. §§ 13-3994 through 13-4000; APMPM 320-U; AMPM 320-Z; TRBHA Intergovernmental Agreement (IGA).

### **PURPOSE**

This Policy establishes requirements for the Care Management and oversight of individuals who have been granted conditional release from the Arizona State Hospital (ASH) by the Superior Court.

### **DEFINITIONS**

1. "Arizona State Hospital" or "ASH" means the state hospital providing long-term inpatient psychiatric care to Arizonans with mental illnesses who are under court order for treatment.
2. "Care Management" means a group of activities performed to identify and manage clinical interventions or alternative treatments for identified Members to reduce risk, cost, and help achieve better health outcomes. Distinct from Support Coordination, Care Management does not include the day-to-day duties of service delivery.

3. “Conditional Release Plan” or “CRP” means a supervised treatment plan ordered by the Superior Court in conjunction with the State mental health facility and behavioral health community providers which specifies the conditions of a Member’s release.
4. “Member” means the same as “Client” as defined in A.R.S. § 36-551.
5. “Service Plan” means a complete written description of all covered health services and other informal supports which includes individualized goals, peer-and-recovery support, family support services, care coordination activities and strategies to assist the member in achieving an improved quality of life. For purposes of this Policy, for fee-for-service populations, the term Treatment Plan may be used interchangeably with the term Service Plan.
6. “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.

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

## **POLICY**

### **A. CARE MANAGEMENT**

1. The Division shall not delegate the Superior Court Contractor Care Management functions to the Administrative Services Subcontractors (AdSS) for Members who have been granted conditional release from the Arizona State Hospital (ASH).
2. The Division's HCS Complex Care team shall be responsible for:
  - a. Acting as the single key point of contact who is responsible for collaboration with the Arizona State Hospital (ASH) and the Superior Court;
  - b. Coordinating with ASH for discharge planning, including ensuring the Member with diabetes has appropriate diabetic monitoring equipment and supplies, and has been educated and trained to the use prior to discharge;
  - c. Participating in the development and implementation of the

CRP;

- d. Participating in the modification of an existing or the development of a new Service Plan that complies with the CRP;
- e. Ensuring coordination of care with the Member's treatment team, Tribal Regional Behavioral Health Authority (TRBHA) assigned Support Coordinator, and providers of both physical and behavioral health services to implement the Service Plan and the CRP;
- f. Providing Member outreach and engagement at least once per month to assist the Superior Court in evaluating compliance with the approved CRP;
- g. Attending outpatient staffing at least once per month either telephonically or face-to-face;
- h. Providing routine review of administrative and clinical activities, submitting the Conditional Release Monthly Monitoring Report, and confirmation of delivery of

reporting to the Superior Court, and ASH;

2. The Division shall confirm immediate notification was completed by the outpatient provider to the Superior Court and ASH if a Member violates any term of his or her CRP, psychiatric decompensation, or use of alcohol, illegal substances or prescription medications not prescribed to the Member, and provide a copy to AHCCCS.
3. The Division, in conjunction with ASH and supervision of the courts shall engage the outpatient provider in care coordination as necessary, when there is any necessary revocation to inpatient or secured status for patients on full conditional release.
4. The Division shall provide outpatient provider monitoring to include:
  - a. Monitoring activities and services provided to assure Member compliance with Conditional Release Plan (CRP);  
and
  - b. Ensuring behavioral health provider completion and

notifications to the Superior Court, AHCCCS, and ASH including:

- i. Mental health reports,
- ii. Monitoring Conditional Release Monthly Monitoring Report, for Members on conditional release, and
- iii. Providing additional documentation at the request of AHCCCS, ASH, or the Superior Court.

## **B. DIVISION RESPONSIBILITIES**


1. The Division shall:
  - a. Ensure AdSS provides training to outpatient providers serving Members on conditional release and ensure outpatient providers demonstrate understanding of A.R.S. § 13-3991 and A.R.S. §§ 13-3994 through 13-4000, duties of outpatient providers; and
  - b. Establish relationships with the Superior Court and ASH to support streamlined communication and collaboration between the Division, outpatient treatment team, ASH, and the Superior Court.

2. The Division Behavioral Health Complex Care Specialist shall coordinate with the Support Coordinator and care manager, as needed, for Members on Conditional Release from the Arizona State Hospital (ASH) consistent with the CRP issued by the Superior Court to facilitate discharge.
3. The Division shall monitor the status and outcomes of Members subject to a Conditional Release issued by the Superior Court and AHCCCS, including through the Conditional Release Monthly Monitoring Report as directed by the Contractor Chart of Deliverables
4. The Division shall follow all obligations, including those stated in this section, applicable to it as set forth as specified in A.R.S. § 13-3994.

**C. FOR MEMBERS ENROLLED WITH TRIBAL HEALTH PLAN (THP) OR TRBHA**

1. The Support Coordinator shall provide case management for THP members in collaboration with TRBHA or behavioral health case manager, as applicable.

2. The Support Coordinator shall notify the case managers of the requirement to directly coordinate with ASH and the Superior Court if case management is being provided by a FFS provider.
3. Support Coordination shall refer FFS behavioral health providers to AMPM 320-Z for requirements.
4. The Division shall refer to AMPM 320-U Pre-Petition Screening, Court Ordered Evaluation and Court Ordered Treatment for additional information regarding the recognition of tribal court orders.

Signature of Chief Medical Officer:   
[Anthony Dekker \(Aug 22, 2023 10:03 PDT\)](#)  
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