

320-P - SERIOUS MENTAL ILLNESS ELIGIBILITY DETERMINATIONEFFECTIVE DATES: 07/01/16, 10/01/17, 01/01/19¹REVISION DATES: 01/04/17, 03/15/18²**I. PURPOSE**

This Policy applies to Acute Care, ALTCS/EPD, CRS, and RBHA Contractors, Fee-For-Services (FFS) Programs as delineated within this ~~P~~policy including: Tribal ALTCS, TRBHAs, and all FFS populations, excluding Federal Emergency Services (FES). (For FES, see AMPM Chapter 1100), and the AHCCCS designee authorized which-to conducts Serious Mental Illness (SMI) Eligibility &Determinations.³

This Policy also applies to subcontracted providers, including Indian Health Services (IHS) and providers that are owned or managed by Tribal governments (including 638 facilities), that choose to send assessments to the AHCCCS designee which-authorized to conducts SMI Eligibility Determinations.

This Policy establishes requirements regarding SMI Eligibility Determinations.

A critical component of the AHCCCS delivery system is the effective and efficient identification of persons-individuals who have behavioral health needs due to the severity of their behavioral health disorder. One such group is individuals persons determined to have an SMI. Without receipt of the appropriate care, these individuals persons are at high risk for further deterioration of their physical and mental condition, increased hospitalizations and potential homelessness and incarceration. In order to ensure that individuals persons who may have an SMI are promptly identified and enrolled for services, AHCCCS has developed a standardized process for the referral, evaluation, and determination of SMI eligibility. The requirements associated with the referral for an SMI evaluation and SMI Eligibility &Determination are set forth in this Policy.

II. DEFINITIONS**ASSESSMENT**

The ongoing collection and analysis of a individual person's's medical, psychological, psychiatric and social conditions in order to initially determine if a health disorder exists, if there is a need for behavioral health services, and on an ongoing basis ensure that the individual's person's service plan is designed to meet the individual's person's (and family's) current needs and long term goals.

¹ Date changes are effective

² Date RFP YH18-0017 issued

³ Aligning with other policy language/definitions

EVALUATION

The process of analyzing current and past treatment information including assessment, treatment other medical records and documentation for purposes of making a decision as to an individual's ~~person's~~ eligibility for SMI services.

DETERMINING ENTITY

Either the AHCCCS designee authorized to ~~make~~ conduct SMI Eligibility ~~d~~eterminations or a TRBHA (for each TRBHA, tribal members only) authorized to make the final determination of SMI eligibility.

~~Seriously Mentally Ill (SMI) – A person 18 years of age or older as defined in A.R.S. §36-550.~~

SERIOUS MENTAL ILLNESS (SMI)⁴

A condition as defined in A.R.S. §36-550 and determined in an individual 18 years of age or older.

SMI ELIGIBILITY DETERMINATION

A determination as to whether or not an individual meets the diagnostic and functional criteria established for the purpose of determining an individual's ~~person's~~ eligibility for SMI services.

SMI DECERTIFICATION

The process that results in the removal of the SMI behavioral health category designation from the member's record.

~~III.~~

IV. III. POLICY

A. GENERAL REQUIREMENTS

~~1. All persons~~ The Determining Entity conducts SMI Eligibility Determinations for the below populations⁵. ~~must be e~~valuations~~d~~ for SMI eligibility ~~must be conducted~~ by a Qualified Clinician, as defined in A.A.C. R9-21-101(B), and have an SMI Eligibility ~~D~~etermination made by ~~the a~~ Determining Entity ~~if~~:

Populations

a. ~~The Individuals 18 or older person makes~~ who make such a request ~~or consent to~~ an SMI Eligibility Determination, ~~or~~

⁴ Added definition

⁵ Revised to utilize the term 'individual' or 'member' throughout as appropriate rather than 'person'

- ~~a.~~b. Individuals 17 and six months who are currently receiving behavioral health services in preparation for behavioral health services as an adult. Refer also to AHCCCS Transition to Adulthood Practice Tool 8.0.
 - c. Individuals currently designated as SMI who are receiving behavioral health services, or an AHCCCS MCO contracted provider or legal guardian, who request a review of the SMI Eligibility Determination.
 - ~~b.~~ ~~A guardian/legal representative who is authorized to consent to inpatient treatment pursuant to A.R.S. §14-5312 makes a request on behalf of the person,~~
 - d. Individuals ordered to undergo an SMI Eligibility Determination by or through a Superior Court in Arizona. An Arizona Superior Court issues an order instructing that a person is to undergo a SMI evaluation/determination, and
 - e. Individuals ordered to undergo an SMI Eligibility Determination by a Tribal Court when that order has been recognized pursuant to A.R.S. §12-136.⁶
2. A guardian who is authorized pursuant to A.R.S. §14-5312 may make a request on behalf of the individual.⁷
3. A TRBHA may delegate to the AHCCCS designee authorized to conduct SMI Eligibility Determinations some or part of the responsibilities established under this Policy.⁸
4. The SMI eligibility evaluation record must contain all of the documentation that was considered during the review including, but not limited to current and/or historical treatment records. The record may be maintained in either hardcopy or electronic format. Contractor and TRBHAs must develop and make available to providers any requirements or guidance on SMI eligibility evaluation record location and/or maintenance.
- 4.5. Computation of time is as follows:
- i. Day Zero: The day the initial assessment is completed by a qualified clinician, regardless of time of the assessment,
 - ii. Day One: The next business day after the initial assessment is completed. The individual or organization completing the initial assessment must provide it to the Determining Entity as soon as practicable, but no later than 11:59 pm on Day One,
 - iii. Day Three: The third business day after the initial assessment is completed. The Determining Entity shall have at least two business days to complete the final SMI Eligibility Determination but the final SMI Eligibility Determination shall be completed no later than Day Three,
 - iv. SMI Eligibility Determination Due Date: Day Three - Three business days after Day Zero, excluding weekends and holidays, and is the date that the SMI Eligibility Determination decision shall be rendered. This date may be amended if an extension is approved in accordance with this Policy.

⁶ Section reworded to align with contract populations served

⁷ Revised statute reference to align with general guardianship delineated in A.R.S. 14-5312

⁸ Moved from below

- ~~2. A TRBHA may delegate to the AHCCCS designee which conducts SMI determinations some or part of the responsibilities established under this Policy. A member is at least the age of 17.5. Refer also to AHCCCS Transition to Adulthood Practice Tool 8.0.~~

B. PROCESS FOR COMPLETION OF THE INITIAL SMI EVALUATION

1. In accordance with A.A.C. R9-21-303, Upon receipt of a referral, a request, or identification of the need for an SMI Eligibility determination, The Contractor, TRBHA, Tribal ALTCS case manager, or designated Arizona Department of Corrections (ADC) or Arizona Department of Juvenile Corrections (ADJC) staff person will shall schedule an appointment for an initial meeting with the individual person and a Qualified eclinician (see AMPM Policy 950) to initiate an assessment.² This shall occur no later than seven business days after receiving the request or referral.

For referrals seeking an SMI Eligibility Determination for individuals admitted to a hospital for psychiatric reasons, the entity scheduling the evaluation shall ensure that documented efforts are made to schedule a face-to-face SMI assessment with the individual member while hospitalized.

2. During the initial SMI evaluation meeting with the individual person and a qualified clinician, the clinician must:
- Make a clinical judgement as to whether the individual person is competent enough to participate in an evaluation,
 - Obtain written consent to conduct the assessment from the individual person or, if applicable, the individual's person's guardian, unless the person individual has been ordered to undergo evaluation as part of Court Ordered Treatment proceedings,
 - Provide to the individual person and, if applicable, the individual's person's guardian, the information required in A.A.C. R9-21-301(D)(2), a client rights brochure, and the appeal notice required by A.A.C. R9-21-401(B),
 - Obtain authorization for the release of information, if applicable, (see AMPM Policy 550) for any documentation that would assist in the determination of the individual's person's eligibility for SMI services,
 - Conduct an assessment if one has not been completed within the last six months,
 - Complete the SMI Eligibility Determination Form (see AMPM Exhibit Attachment A320-P-4)¹⁰, and
 - g. Upon completion of the initial evaluation, submit all information to the Determining Entity within one business day.
3. Refer to AMPM Policy 320-O for Behavioral Health Assessments and Treatment Service Planning.¹¹

⁹ Included reference to rule – this is outlining the assessment/evaluation process prior to the SMI Eligibility Determination process

¹⁰ Exhibits renamed to attachments to align with AMPM formatting

¹¹ Included reference to additional policy for more information regarding the BH assessment

C. CRITERIA FOR SMI ELIGIBILITY

1. The final determination of SMI [eligibility](#) requires both a qualifying SMI diagnosis and functional impairment because of the qualifying diagnosis (see [AMPM Attachment B Exhibit 320-P-2](#) for a list of qualifying diagnoses).
2. Functional Criteria for SMI eligibility: To meet the functional criteria for SMI status, an ~~an individual person~~ must have, as a result of a qualifying SMI diagnosis, dysfunction in at least one of the following ~~four~~ domains, as described below, for most of the past twelve months or for most of the past six months with an expected continued duration of at least six months.
 - a. Inability to live in an independent or family setting without supervision – Neglect or disruption of ability to attend to basic needs. Needs assistance in caring for self. Unable to care for self in safe or sanitary manner. Housing, food and clothing must be provided or arranged for by others. Unable to attend to the majority of basic needs of hygiene, grooming, nutrition, medical and dental care. Unwilling to seek prenatal care or necessary medical/dental care for serious medical or dental conditions. Refuses treatment for life threatening illnesses because of behavioral health disorder,
 - b. A risk of serious harm to self or others – Seriously disruptive to family and/or community. Pervasively or imminently dangerous to self or others' bodily safety. Regularly engages in assaultive behavior. Has been arrested, incarcerated, hospitalized or at risk of confinement because of dangerous behavior. Persistently neglectful or abusive towards others in the ~~individual's person's~~ care. Severe disruption of daily life due to frequent thoughts of death, suicide, or self-harm, often with behavioral intent and/or plan. Affective disruption causes significant damage to the ~~individual's person's~~ education, livelihood, career, or personal relationships,
 - c. Dysfunction in role performance – Frequently disruptive or in trouble at work or at school. Frequently terminated from work or suspended/expelled from school. Major disruption of role functioning. Requires structured or supervised work or school setting. Performance significantly below expectation for cognitive/developmental level. Unable to work, attend school, or meet other developmentally appropriate responsibilities.
 - d. Risk of Deterioration:¹²
 - i. A qualifying diagnosis with probable chronic, relapsing, and remitting course,
 - ii. Co-morbidities (e.g. developmental/intellectual disability, substance dependence, personality disorders),
 - iii. Persistent or chronic factors such as social isolation, poverty, extreme chronic stressors (e.g. life-threatening or debilitating medical illnesses, victimization), or

¹² Reformatted to move *Risk of Deterioration* as a (d) in this listing

- iv. Other (e.g. past psychiatric history, gains in functioning have not solidified or are a result of current compliance only, court-committed, care is complicated and requires multiple providers).
3. The following reasons shall not be sufficient in and of themselves for denial of SMI eligibility:
 - a. An inability to obtain existing records or information, or
 - b. Lack of a face-to-face psychiatric or psychological evaluation.

D. ~~PERSON WITH~~ CO-OCCURRING SUBSTANCE USE

1. For individuals ~~persons~~ who have a qualifying SMI diagnosis and co-occurring substance use, for purposes of SMI Eligibility ~~d~~Determination, presumption of functional impairment is as follows:
 - a. For psychotic diagnoses (bipolar I disorder with psychotic features, delusional disorder, major depression, recurrent, severe, with psychotic features, schizophrenia, schizoaffective disorder and psychotic disorder not due to a substance or known psychological condition) functional impairment is presumed to be due to the qualifying psychiatric diagnosis,
 - b. For other major mental disorders (bipolar disorders, major depression, and obsessive-compulsive disorder), functional impairment is presumed to be due to the psychiatric diagnosis, unless:
 - i. The severity, frequency, duration or characteristics of symptoms contributing to the functional impairment cannot be attributed to the qualifying mental health diagnosis, or
 - ii. The assessor can demonstrate, based on a historical or prospective period of treatment, that the functional impairment is present only when the individual ~~person~~ is abusing substances or experiencing symptoms of withdrawal from substances.
 - c. For all other mental disorders not covered above, functional impairment is presumed to be due to the co-occurring substance use unless:
 - i. The symptoms contributing to the functional impairment cannot be attributed to the substance use disorder, or
 - ii. The functional impairment is present during a period of cessation of the co-occurring substance use of at least 30 days, or
 - iii. The functional impairment is present during a period of at least 90 days of reduced use and is unlikely to cause the symptoms or level of dysfunction.

E. PROCESS FOR COMPLETION OF FINAL SMI ELIGIBILITY DETERMINATION

1. The Contractor, TRBHA, and Tribal ALTCS shall develop and make available to providers its policies and procedures that describe the providers' requirements for submitting the evaluation packet in order for the Determining Entity to make the final SMI Eeligibility ~~d~~Determination.

2. ~~The A licensed~~ psychiatrist as defined in A.R.S. §36-501, a psychologist as defined in A.R.S. §32-2061, or a registered nurse practitioner licensed as an adult psychiatric and mental health nurse who is designated by the Determining Entity¹³ must make a final determination as to whether the individual person meets the eligibility requirements for SMI status based on:
 - a. A face-to-face assessment or reviewing a face-to-face assessment by a qualified clinician ~~(see AMPM Policy 950)~~, and
 - b. A review of current and historical information, if any, obtained orally or in writing by the assessor from collateral sources, and/or present or previous treating clinicians.

3. The following shall occur if the designated reviewing psychiatrist, psychologist, or nurse practitioner (as defined above)¹⁴ ~~has not conducted a face-to-face assessment and~~ has a disagreement with the ~~current assessing/evaluating or treating Q~~qualified ~~behavioral health professional or behavioral health technician~~ Clinician that cannot be resolved by oral or written communication:
 - a. Disagreement regarding diagnosis: Determination that the individual person does not meet eligibility requirements for SMI status must be based on a face-to-face diagnostic evaluation conducted by a designated psychiatrist, psychologist, or nurse practitioner (as defined above)¹⁵. The resolution of (specific reasons for) the disagreement shall be documented in the individual's person's comprehensive clinical record,
 - b. Disagreement regarding functional impairment: Determination that the individual person does not meet eligibility requirements for SMI status must be documented by the psychiatrist, psychologist, or nurse practitioner (as defined above)¹⁶ in the individual's person's comprehensive clinical record to include the specific reasons for the disagreement and will include a clinical review with the qualified clinician.

4. If there is sufficient information to determine SMI eligibility, the individual person shall be provided written notice of the SMI ~~E~~eligibility ~~D~~determination within three business days of the initial meeting with the qualified clinician in accordance with this Policy.

F. ISSUES PREVENTING TIMELY COMPLETION OF SMI ELIGIBILITY DETERMINATION – EXTENDING COMPLETION OF SMI ELIGIBILITY DETERMINATION TIME PERIOD

1. The time to initiate or complete the SMI ~~E~~eligibility ~~D~~determination may be extended no more than 20 days if the individual person agrees to the extension and:
 - a. There is substantial difficulty in scheduling a meeting at which all necessary participants can attend,
 - b. The individual person fails to keep an appointment for assessment, evaluation or any other necessary meeting,

¹³ Added to align with RFP YH18-0017

¹⁴ Refer to #2 which defined who can conduct SMI Eligibility Determinations

¹⁵ Refer to #2 which defined who can conduct SMI Eligibility Determinations

¹⁶ Refer to #2 which defined who can conduct SMI Eligibility Determinations

- c. The ~~individual person~~ is capable of, but temporarily refuses to cooperate in the preparation of the completion of an assessment or evaluation,
- d. The ~~individual person~~ or the ~~individual's person's~~ guardian and/or designated representative requests an extension of time,
- e. Additional documentation has been requested, but has not yet been received, or
- f. There is insufficient functional or diagnostic information to determine SMI eligibility within the required time periods.

Insufficient diagnostic information shall be understood to mean that the information available to the reviewer is suggestive of two or more equally likely working diagnoses, only one of which qualifies as SMI, and an additional piece of existing historical information or a face-to-face psychiatric evaluation is likely to support one diagnosis more than the other(s).

2. The Determining Entity must:
 - a. Document the reasons for the delay in the ~~individual's person's~~ eligibility determination record when there is an administrative or other emergency that will delay the determination of a SMI status, and
 - b. Not use the delay as a waiting period before determining a SMI status or as a reason for determining that the ~~individual person~~ does not meet the criteria for SMI eligibility (because the determination was not made within the time standards).
3. In situations in which the extension is due to insufficient information:
 - a. The Determining Entity shall request and obtain the additional documentation needed (e.g., current and/or past medical records) and/or perform or obtain any necessary psychiatric or psychological evaluations,
 - b. The designated reviewing psychiatrist, psychologist, or nurse practitioner (as defined in Section E #2 of this Policy)¹⁷ must communicate with the ~~individual's person's~~ current treating clinician, if any, prior to the determination of an SMI, if there is insufficient information to determine the ~~individual's person's~~ level of functioning, and
 - c. SMI eligibility must be determined within three days of obtaining sufficient information, but no later than the end date of the extension.
4. If the evaluation or information cannot be obtained within the required time period because of the need for a period of observation or abstinence from substance use in order to establish a qualifying mental health diagnosis, the ~~individual person~~ shall be notified by the ~~D~~determining ~~E~~ntity that the determination may, with the agreement of the ~~individual person~~, be extended for up to 90 (calendar) days for an Extended Evaluation Period (EEP). This is a 90 day period of abstinence from drug and/or alcohol abuse in order to help the reviewing psychologist make an informed decision regarding SMI eligibility.

¹⁷ Refer to E.2 which defined who can conduct SMI Eligibility Determinations

This extension may be considered a technical re-application to ensure compliance with the intent of A.A.C. R9-21-303. However, the ~~individual person~~ does not need to actually reapply. Alternatively, the determination process may be suspended and a new application initiated upon receipt of necessary information.

5. If the ~~individual person~~ refuses to grant an extension, SMI eligibility must be determined based on the available information. If SMI eligibility is denied, the ~~individual person~~ will be notified of his/her appeal rights and the option to reapply in accordance with this Policy.

G. NOTIFICATION OF SMI ELIGIBILITY DETERMINATION

1. If the ~~individual person~~ is determined as SMI, the SMI status must be reported to the ~~individual person~~ or their legal guardian by the Determining Entity in writing, including notice of the ~~individual's person's~~ right to appeal the decision (see ACOM Policy 444).
2. If the eligibility determination results in a denial of a SMI status, the Determining Entity must provide written notice of the decision and include:
 - a. The reason for denial of SMI eligibility (see ~~AMPM Exhibit Attachment A~~ 320-P-1),
 - b. The right to appeal (see ACOM Policy 414 and ACOM Policy 444), and
The ~~st~~atement that Title XIX/XXI eligible ~~individual persons~~ will continue to receive needed Title XIX/XXI covered services. In such cases, the ~~individual's person's~~ behavioral health category assignment must be assigned based on criteria in the AHCCCS Technical Interface Guidelines.

c.

H. RE-ENROLLMENT OR TRANSFER

If the ~~member's person's~~ status is SMI at disenrollment or transition to another Contractor, TRBHA or Tribal ALTCS, the ~~person's-member's~~ status shall continue as SMI.

A ~~person-member~~ shall retain their SMI status unless a determination is made by a Determining Entity that the ~~individual person~~ no longer meets criteria.

I. REVIEW OF SMI ELIGIBILITY

1. The Contractor, TRBHA and Tribal ALTCS must indicate in policies and procedures made available to their providers the process for reviewing an SMI ~~E~~ligibility ~~D~~etermination.

2. The Contractor, TRBHA, Tribal ALTCS case manager, or contracted behavioral health providers may seek a review of ~~aan individual's person's~~ SMI eligibility from the Determining Entity:
 - a. As part of an instituted, periodic review of all ~~individuals persons~~ determined to have an SMI,
 - b. When there has been a clinical assessment that supports that the ~~individual person~~ no longer meets the functional and/or diagnostic criteria, or
 - c. As requested by ~~aan individual member~~ who has been determined to meet SMI eligibility criteria, or their legally authorized representative.
3. A review of the determination may not be requested by the TRBHA, Contractor or their contracted behavioral health providers within six months from the date an ~~individual individual~~ has been determined SMI eligible.

J. SMI DECERTIFICATION

There are two established methods for removing an SMI designation, one clinical and the other an administrative option, as follows:

1. A member who has an SMI designation or an individual from the member's clinical team may request an SMI Clinical Decertification from the AHCCCS designee ~~which authorized to~~ conducts SMI determinations. An SMI Clinical Decertification is a determination that a member who has an SMI designation no longer meets SMI criteria. If, as a result of a review, the ~~person-member~~ is determined to no longer meet the diagnostic and/or functional requirements for SMI status:
 - a. The Determining Entity shall ensure that written notice of the determination and the right to appeal is provided to the affected ~~person-member~~ with an effective date of 30 days after the date the written notice is issued,
 - b. The Contractor, TRBHA or Tribal ALTCS shall ensure that services are continued in the event an appeal is timely filed, and that services are appropriately transitioned as part of the discharge planning process.

~~2.~~

~~e.~~

~~3.2.~~ SMI Administrative Decertification

A member who has an SMI designation may request an SMI Administrative Decertification from AHCCCS, DHCM, and Clinical Resolution Unit if the member has not received behavioral health services for a period of two or more years.

- a. Upon receipt of a request for Administrative Decertification, the Contractor shall direct the member to contact AHCCCS DHCM Customer Service,
- b. AHCCCS will evaluate the member's request and review data sources to determine the last date the member received a behavioral health service. AHCCCS will inform the member of changes that may result with the removal of the member's SMI designation. Based upon review, the following will occur:
 - i. In the event the member has not received a behavioral health service within the previous two years, the member will be provided with ~~AMPM~~

[Exhibit Attachment C-320-P-3](#). This form must be completed by the member and returned to AHCCCS,

- ii. In the event the review finds that the member has received behavioral health services within the prior two year period, the member will be notified that they may seek decertification of their SMI status through the Clinical Decertification process.

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