



**320-R SPECIAL ASSISTANCE FOR PERSONS DETERMINED TO HAVE A  
SERIOUS MENTAL ILLNESS**

INITIAL

EFFECTIVE DATE: 07/01/2016

**BACKGROUND**

Contractors and Tribal Regional Behavioral Health Authorities (TRBHA), the Arizona State Hospital (AzSH) and subcontracted providers must identify and report to the AHCCCS Office of Human Rights (OHR) persons determined to have a Serious Mental Illness (SMI) who meet the criteria for Special Assistance. If the person's Special Assistance needs appear to be met by an involved family member, friend, designated representative or guardian, the Contractor, TRBHA or behavioral health provider must still submit a notification to the OHR. Contractors, TRBHAs, AzSH, subcontracted providers and the Behavioral Health Office of Grievances and Appeals (BHOGA) must ensure that the person designated to provide Special Assistance is involved at key stages.

**AMOUNT, DURATION AND SCOPE**

The purpose of this policy is to establish uniform guidelines for:

1. Identifying persons determined to have a Serious Mental Illness (SMI) who are in need of Special Assistance,
2. Ensuring that persons in need of Special Assistance have their Special Assistance needs met, and
3. Maintaining and disseminating required reports on persons in need of Special Assistance.

As applicable, RBHAs must ensure that all subcontracted providers adhere to the requirements of this Policy.

**A. GENERAL REQUIREMENTS**

1. Criteria to deem a person to be in need of Special Assistance are as follows:
  - a. A person determined to have a Serious Mental Illness (SMI) is in need of Special Assistance if he/she is also unable to do any of the following:
    - i. Communicate preferences for services,
    - ii. Participate effectively in Individual Service Planning (ISP) or Inpatient Treatment Discharge Planning (ITDP),
    - iii. Participate effectively in the appeal, grievance or investigation processes, and



- iv. The person's limitations described in i–iii above must also be due to any of the following:
  - (a) Cognitive ability/intellectual capacity (i.e. cognitive impairment, borderline intellectual functioning, or diminished intellectual capacity),
  - (b) Language barrier (an inability to communicate, other than a need for an interpreter/translator), and/or
  - (c) Medical condition (including, but not limited to traumatic brain injury, dementia, or severe psychiatric symptoms).

A person who is subject to general guardianship has been found to be incapacitated under A.R.S. § 14-5304, and therefore automatically satisfies the criteria for Special Assistance.
- b. For a person determined to have a SMI, the existence of any of the following circumstances should prompt the Contractor, TRBHA, AzSH, or subcontracted provider to more closely review whether the person is in need of Special Assistance:
  - i. Developmental disability involving cognitive ability,
  - ii. Residence in a 24 hour setting,
  - iii. Limited guardianship, or the Contractor, TRBHA or subcontracted provider is recommending and/or pursuing the establishment of a limited guardianship, or
  - iv. Existence of a serious medical condition, that affects his/her intellectual and/or cognitive functioning (such as, dementia or traumatic brain injury).
2. The following may deem a person to be in need of Special Assistance:
  - a. A qualified clinician providing treatment for the person,
  - b. A case manager of a Contractor, TRBHA or subcontracted provider,
  - c. A clinical team of a Contractor, TRBHA or subcontracted provider,
  - d. A Contractor or TRBHA,
  - e. A program director of a subcontracted provider (including AzSH),
  - f. The Deputy Director of AHCCCS or designee, or
  - g. A hearing officer assigned to an appeal involving a person determined to have a SMI.
3. When to Screen for Special Assistance: Contractors, TRBHAs, AzSH and subcontracted providers must on an ongoing basis screen whether persons determined to have a SMI are in need of Special Assistance in accordance with the criteria set out in Section A of this Policy. Minimally, this must occur at the following stages:
  - a. Assessment and annual updates,
  - b. Development of or update to the Individual Service Plan (ISP),
  - c. Upon admission to a psychiatric inpatient facility,
  - d. Development of or update to an Inpatient Treatment and Discharge Plan (ITDP),
  - e. Initiation of the grievance or investigation processes,
  - f. Filing of an appeal, and
  - g. Existence of a condition which may be a basis for a grievance, investigation or an appeal.



4. Documentation
  - a. Contractors, TRBHAs, AzSH and subcontracted providers shall document in the clinical record each time a staff member screens a person for Special Assistance, indicating the factors reviewed and the conclusion. If the conclusion is that the person is in need of Special Assistance, they shall notify the OHR using AMPM Exhibit 320-6, *Notification of Person In Need of Special Assistance* in accordance with the procedures below.
  - b. Before submitting AMPM Exhibit 320-6, Contractors, TRBHAs and their subcontracted providers shall check if the person is already identified as in need of Special Assistance. A notation of Special Assistance designation and a completed AMPM Exhibit 320-6 should already exist in the clinical record. However, if it is unclear, subcontracted providers must review Contractor or TRBHA data or contact the Contractor or TRBHA to inquire about current status. Contractors and TRBHAs are required to maintain a database on persons in need of Special Assistance and share data with providers on a regular basis (at a minimum quarterly).

**B. NOTIFICATION REQUIREMENTS TO THE OFFICE OF HUMAN RIGHTS**

1. If a person is not correctly identified as Special Assistance, Contractors, TRBHAs, AzSH and subcontracted providers must submit Part A of AMPM Exhibit 320-6 to the OHR within five working days of identifying a person in need of Special Assistance. If the person has a Special Assistance need requiring immediate assistance, the notification form must be submitted immediately with a notation indicating the urgency. Contractors, TRBHAs, AzSH and subcontracted providers should inform the person of the notification and explain the benefits of having another person involved who can provide Special Assistance, if able.
2. If the person is under a guardianship or one is in process, the documentation of such must also be submitted to OHR. However, if the documentation is not available at the time of submission of the AMPM Exhibit 320-6 notification, the form should be submitted within the required timeframes, followed by submittal of the guardianship documentation.
3. The OHR (reviews the notification form to ensure that it contains sufficient information detailing the criteria and responds to the Contractor, TRBHA and subcontracted providers by completing Part B of AMPM Exhibit 320-6 within five working days of receipt of the form. In the event the necessary information is not provided on the form, OHR contacts the staff member submitting the notification for clarification. In the event the notification is urgent, OHR will respond as soon as possible, but generally within one working day of receipt of the notification.
4. The notification process is not complete until OHR completes Part B of the form and sends it back to the Contractor or TRBHA and subcontracted providers. The



- Contractors, TRBHAs and subcontracted providers should follow up with OHR if no contact is made or Part B is not received within five working days.
5. OHR designates which agency/person will provide Special Assistance when processing AMPM Exhibit 320-6. When the agency/person providing Special Assistance changes, OHR processes an “updated Part B” to document the change.
  6. In the event the person or agency currently identified as providing Special Assistance is no longer actively involved, the Contractor, TRBHA or subcontracted provider must notify DHCAA. If a DHCAA advocate is also assigned, notification to the advocate is sufficient.

**C. PERSONS NO LONGER IN NEED OF SPECIAL ASSISTANCE**

1. Contractors, TRBHAs, AzSH or subcontracted providers must notify the OHR within 10 days of an event or determination that a person in need of Special Assistance no longer meets criteria by completing Part C of the original notification form (with Parts A & B completed when first identified), noting:
  - a. The reason(s) why Special Assistance is no longer required,
  - b. The effective date,
  - c. The name, title, phone number and e-mail address of the staff person completing the form, and
  - d. The date the form is completed.
2. The following are instances that should prompt Contractors, TRBHAs, AzSH or subcontracted providers to submit a Part C:
  - a. The original basis for the person meeting Special Assistance criteria is no longer applicable and the person does not otherwise meet criteria,
    - i. Contractors, TRBHA, AzSH or subcontracted provider must first discuss the determination with the person or agency providing Special Assistance to obtain any relevant input, and
    - ii. This includes when a person is determined to no longer be a person with a SMI (proper notice and appeal rights must be provided and the period to appeal must have expired).
  - b. The person passes away.
  - c. The person’s episode of care is ended with the Contractor or TRBHA (Non-Title XIX persons with a SMI will also be disenrolled) and the person is not transferred to another Contractor or TRBHA. Contractors, TRBHAs or subcontracted providers must first perform all required re-engagement efforts, which includes contacting the person providing Special Assistance, per AMPM Policy 1040, *Engagement, Re-engagement and Closure*. Proper notice and appeal rights must be provided and the period to appeal must have expired prior to submission of Part C.



**NOTE:** Submission of a Part C is **not** needed when a person transfers to another Contractor or TRBHA, as the Special Assistance designation follows the person.

3. Upon receipt of Part C of the AMPM Exhibit 320-6, OHR-reviews content to confirm accuracy and completeness and returns it to the agency that submitted it, copying any involved Contractors, TRBHAs or subcontracted provider.

**D. REQUIREMENT OF CONTRACTORS, TRBHAs, AZSH, SUBCONTRACTED PROVIDERS AND BEHAVIORAL HEALTH OFFICE OF GRIEVANCES AND APPEALS (BHOGA) TO HELP ENSURE THE PROVISION OF SPECIAL ASSISTANCE.**

1. Contractors, TRBHAs, AzSH, subcontracted providers and BHOGA must maintain open communication with the person (guardian, family member, friend, OHR advocate, etc.) assigned to meet the person's Special Assistance needs. Minimally, this involves providing timely notification to the person providing Special Assistance to ensure involvement in the following:
  - a. **ISP planning and review:** Includes any instance when the person makes a decision regarding service options and/or denial/modification/termination of services (service options include not only a specific service but also potential changes to provider, site, -physician and case manager assignment).
  - b. **ISP development and updates:** Must be in accordance with AMPM Policy 320-O, *Service Planning, Assessments, and Discharge Planning*.
  - c. **ITDP planning:** Includes any time a person is admitted to a psychiatric inpatient facility and involvement throughout the stay and discharge.
  - d. **Appeal process:** Includes circumstances that may warrant the filing of an appeal, so all Notices of Action (NOA) or Notices of Decision (NOD) issued to the person/guardian must also be copied to the person designated to meet Special Assistance needs; and
  - e. **Investigation or Grievance:** Includes when an investigation/grievance is filed and circumstances when initiating a request for an investigation/grievance may be warranted.
2. In the event that such procedures are delayed in order to ensure the participation of the person providing Special Assistance, the Contractors, TRBHAs, AzSH, subcontracted providers and BHOGA must document the reason for the delay in the clinical record, or the investigation, grievance or appeal file. If an emergency service is needed Contractors, TRBHAs, AzSH, and/or subcontracted providers must, ensure that the person receives the needed services in the interim and promptly notify the agency/person providing Special Assistance.
3. Contractors, TRBHAs and subcontracted providers shall timely provide relevant details and a copy of the original AMPM Exhibit 320-6 (both Parts A and B) to the



- receiving entity and when applicable, Case Manager, when a person in need of Special Assistance is:
- a. Admitted to an inpatient facility,
  - b. Admitted to a residential treatment setting, or
  - c. Transferred to a different Contractor, TRBHA, Case Management Provider Site, or Case Manager.
4. Contractors, TRBHAs and subcontracted providers must periodically review whether the person's needs are being met by the person or agency designated to meet the person's Special Assistance needs. If a concern arises, they should first address it with the person or agency providing Special Assistance. If the issue is not promptly resolved, they must take further action to address the issue, which may include contacting OHR administration for assistance.

**E. BEHAVIORAL HEALTH OFFICE OF GRIEVANCES AND APPEALS (BHOGA) AND RBHA OFFICE OF GRIEVANCE AND APPEALS REPORTING REQUIREMENTS (OGA)**

1. Upon receipt of a request for investigation, grievance or an appeal, the Contractor's or TRBHAs' OGA and the BHOGA must review whether the person is already identified as in need of Special Assistance.
2. If so, the Contractor, TRBHA or BHOGA must ensure that:
  - a. A copy of the request for investigation or grievance is sent to OHR within five days of receipt of the request. The Contractor, TRBHA or BHOGA must also forward a copy of the final grievance/investigation decision to the OHR within five days of issuing the decision.
  - b. A copy of an appeal for a person with Special Assistance are sent to OHR.
  - c. The results of the Informal Conference (IC) regarding appeals are sent to OHR. The Contractor, TRBHA or BHOGA shall also forward a copy of any subsequent notice of hearing.

**F. CONTRACTOR AND TRBHA REPORTING REQUIREMENTS**

1. Contractors and TRBHAs must maintain a copy of completed AMPM Exhibit 320-6, Parts A, B and updated if any.
2. Contractors and TRBHAs must maintain a database on persons in need of Special Assistance to ensure compliance with this Policy and the reporting requirements described in this section. This cannot be delegated to Contractor or TRBHA providers.
3. The Contractor and TRBHA must, by the 10th calendar day of each month, provide the OHR with a comprehensive report listing:



- a. All persons in need of Special Assistance who are active as of the end of the previous month,
  - b. Any Part C notifications during the previous month that a person no longer needs Special Assistance.
  - c. Any persons transferred to the Contractor or TRBHA during the previous month who were Special Assistance in the previous Contractor or TRBHA, and
  - d. Any person in need of Special Assistance transferred from the Contractor or TRBHA to another Contractor or TRBHA.
4. The monthly reports must contain the following information:
- a. CIS Number
  - b. Name
  - c. Date of Birth
  - d. Guardian (yes or no)
  - e. Current address
  - f. Current phone number
  - g. Type of residence
  - h. Whether currently at AzSH & unit name
  - i. AzSH Identification Number
  - j. Name of Provider
  - k. Name/location of Provider site
  - l. Name of Case Manager
  - m. Name of Clinical Supervisor
  - n. GSA (for RBHAs serving more than one)
  - o. Title XIX (AHCCCS) enrollment status (yes or no)
  - p. Effective Date (date Part B was completed)
  - q. Person/relationship or agency meeting Special Assistance needs
  - r. Name, address and phone number of person meeting the Special Assistance needs
  - s. If applicable, the Date of Discharge from AzSH
  - t. If applicable, the Date of the Removal (when Part C of the notification was sent to OHR) or the event and event date that prompted the removal
  - u. If applicable, information on any updated Part B (indicating change in person meeting needs), and
  - v. If applicable, the Date of the Inter-RBHA transfer including the name of the receiving Contractor or TRBHA.
5. By the 25<sup>th</sup> day of the month following the end of a quarter, OHR provides Contractors and TRBHAs with a comprehensive report for the previous quarter.
6. The Contractors and TRBHAs in response to OHR's quarterly report must update the Contractors or TRBHA's database with data updates contained in the quarterly report for persons assigned to an OHR advocate and submit an updated report to OHR by the 10th day of the next month, as specified in the RBHA Contract, Exhibit-9, Deliverables. The report must identify any changes in client information, for persons not assigned to an OHR Advocate, that occurred during the previous quarter.



Examples include change in Title XIX enrollment, changes in the person's residence, case management provider or case manager assignment, etc. Contractors, TRBHAs and OHR shall work together to rectify any data discrepancies in a timely manner to ensure that the data maintained is accurate.

7. The - OHR, utilizing data it maintains on all persons in need of Special Assistance, must provide a list of persons in each region to each Human Rights Committee (HRC) by the 25th calendar day of each month. The OHR customarily provides a courtesy copy of the report to the corresponding Contractor or TRBHA.
8. By the 10th calendar day of each month, AzSH must provide the OHR with a comprehensive report listing of persons in need of Special Assistance that were receiving services at AzSH during the previous month. OHR provides the final report to the AzSH HRC and a copy to AzSH by the 25th of the month.
9. Contractors must share Special Assistance data with its subcontracted providers that provide case management to persons determined to have a SMI and verify that a process exists at each case management provider to ensure this data is accessible by front-line provider staff (at a minimum quarterly). Contractors must also establish a process with such providers to obtain quarterly updates on persons currently identified as Special Assistance to support the Contractors or TRBHAs quarterly data updates process with the OHR.

#### **G. CONFIDENTIALITY REQUIREMENTS**

1. Contractors, TRBHAs, AzSH and subcontracted providers shall grant access to clinical records of persons in need of Special Assistance to the OHR in accordance with federal and state confidentiality laws (see AMPM Policy 550).
2. HRCs and their members shall safeguard the monthly list that contains the names of those persons in need Special Assistance regarding any Protected Health Information (PHI). HRCs must inform AHCCCS annually in writing of how it will maintain the confidentiality of the Special Assistance lists. If HRCs request additional information that contains PHI that is not included in the monthly report, they must do so in accordance with the requirements set out in ACOM Policy 447.

#### **H. OTHER PROCEDURES**

1. Contractors, TRBHAs, AzSH and subcontracted providers must maintain a copy of the completed AMPM Exhibit 320-6, (Parts A and B and updated B, if any) in the person's comprehensive clinical record. In the event a person was identified as no longer needing Special Assistance and a Part C of the notification form was completed, the Contractors, TRBHAs, AzSH, and subcontracted providers must maintain a copy of the form in the comprehensive clinical record.



2. Contractors, TRBHAs, AzSH and subcontracted providers must clearly document in the clinical record (i.e. on the assessment, ISP, ITDP, face sheet) and case management/client tracking system if a person is identified as in need of Special Assistance, the person assigned currently to provide Special Assistance, the relationship, contact information including phone number and mailing address.
3. The HRCs must make regular visits to the residential environments of persons in need of Special Assistance to determine whether the services meet their needs and their satisfaction with the residential environment.
4. Contractors must implement quality management measures to ensure the subcontracted providers implement the requirements of this Policy. Audit tools and procedures must be shared with the AHCCCS/OHR Administration prior to use to ensure they address:
  - a. The screening requirements,
  - b. The documentation requirements, and
  - c. The provisions of Special Assistance requirements.
5. Contractors and TRBHAs must ensure that all applicable TRBHA and provider staff are trained regarding the requirements of Special Assistance. (See AMPM Policy 1060).

#### REFERENCES

- AMPM Policy 320-O
- AMPM Policy 550
- AMPM Policy 1040
- AMPM Policy 1060
- ACOM Policy 447
- A.R.S. §§ 36-107,
- A.R.S. 36-501,
- A.R.S. 36-504,
- A.R.S. 36-509,
- A.R.S. 36-517.01
- A.R.S. §§ 41-3803,
- A.R.S. 41-3804
- 9 A.A.C 21
- RBHA Contracts
- TRBHA