

July 10, 2024

The Honorable Katie Hobbs
Governor of Arizona
1700 W. Washington
Phoenix, AZ 85007

Dear Governor Hobbs:

The Arizona Health Care Cost Containment System (AHCCCS) is submitting the 2024 AHCCCS Report on Behavioral Health Services for Adopted Children and Children in Legal Custody of the Arizona Department of Child Safety as required by Title 8, Chapter 4 Article 4:

The Arizona health care cost containment system administration shall track and report annually the number of times the regional behavioral health authority coordinated crisis services because a crisis services provider was unresponsive, the number of times services were not provided within the twenty-one-day time frame, the amount of services accessed directly by an out-of-home placement or adoptive parents that were provided by noncontracted providers, the list of providers that were formerly contracted with the regional behavioral health authority but that terminated the contract and provided services pursuant to this section for one hundred thirty percent of the Arizona health care cost containment system's negotiated rate and the amount the administration spent on services pursuant to this section.

On March 24, 2016, Jacob's Law (A.R.S. § 8-512.01) was enacted. The statute mandates a number of requirements for purposes of ensuring easier access to behavioral health services for children in the legal custody of the Department of Child Safety (DCS) and adopted children who are Medicaid eligible under Title XIX or Title XXI.

Prior to April 1, 2021, children in the legal custody of DCS were enrolled with the statewide Comprehensive Medical and Dental Program (CMDP) for the provision of physical health care services and behavioral health services were provided through the Regional Behavioral Health Authority (RBHA) in their geographical area.

Children in foster care began receiving physical and behavioral health services through a statewide, integrated delivery model starting on April 1, 2021. The integrated new health plan's name is Mercy Care Department of Child Safety Comprehensive Health Plan (Mercy Care DCS CHP), hereafter DCS CHP in this report. The data populated from DCS CHP for this report is for the timeframe of this report, April 1, 2023 - March 31, 2024. Enrollment data for DCS CHP is demonstrated in Table 1 for CYE 2023.

Table 1

DCS CHP Enrollment by County as of October 1, 2023	
Apache	6
Cochise	247
Coconino	169
Gila	118
Graham/Greenlee	45
La Paz	4
Maricopa	5978
Mohave	366
Navajo	127
Pima	2227
Pinal	362
Santa Cruz	63
Yavapai	230
Yuma	157
Total DCS CHP enrollment	10,098

Crisis Services

The ACC-RBHA contractors are responsible for the provision of crisis services throughout their geographical service area. Crisis services include a 24 hour/seven days per week toll-free crisis telephone number, mobile crisis teams, and crisis stabilization services. Jacob’s Law outlines the additional requirement that DCS CHP, DES/DDD (Department of Economic Security, Division of Developmental Disabilities) or ACC plans should coordinate crisis services for a child if an out-of-home placement or if an adoptive parent identifies a child is in need of crisis services, and the crisis provider is not being responsive.

AHCCCS Contractors Operations Manual (ACOM) Policy 449 outlines requirements for DCS CHP and DES/DDD to identify a Children Services Liaison. The primary role of the Children Services Liaison is to:

- Serve as the single point of contact,
- Respond to inquiries from out-of-home placements and adoptive parents,
- Respond to issues and concerns related to the delivery of and access to behavioral health services,

- Collaborate with out-of-home placement and adoptive parents,
- Address barriers to services, including nonresponsive crisis providers, and
- Resolve concerns received in accordance with grievance system requirements.

DCS CHP and DES/DDD report calls received by the Children Services Liaison to AHCCCS on a quarterly basis. Reporting includes the number of calls and types of calls received per month. From April 2023 through March 2024, no calls were received by DCS CHP or DES/DDD for assistance with coordinating crisis services because a crisis services provider was unresponsive.

Behavioral Health Appointment Standards

AHCCCS contractors are required to maintain compliance with appointment availability standards outlined in the contract and ACOM Policy 417, Appointment Availability, Monitoring. This policy establishes a standard process for AHCCCS to monitor and report appointment availability to ensure compliance with AHCCCS network sufficiency standards. A lack of available appointments at a provider's office might require a plan to look to expand its contracted network of providers. DCS CHP must track and report quarterly the Behavioral Health Utilization and Timeframes for the DCS Involved Youth deliverable. AHCCCS publishes this data in the [Foster Care Dashboard](#) quarterly.

ACOM Policy 417 includes behavioral health appointment standards for the contractors. Behavioral health appointment standards for children in legal custody of DCS and adopted children are as follows:

- Rapid Response when a child enters out-of-home placement within the timeframe indicated by the behavioral health condition, but no later than 72 hours after notification by DCS that a child has been or will be removed from their home,
- Initial Assessment within seven calendar days after referral or request for behavioral health services,
- Initial Appointment within timeframes indicated, by clinical need, but no later than 21 calendar days after the initial evaluation, and
- Subsequent Behavioral Health Services within the timeframes according to the needs of the person, but no longer than 21 calendar days from the identification of need.

The AHCCCS Clinical Resolutions Unit tracks the number of grievances for services not provided within 21 calendar days from initial assessment and for subsequent Behavioral Health Services. From April 2023 through March 2024, it was identified that services were not provided within 21 calendar days for three members in foster care and 16 adopted members. Also, DCS CHP reported four additional members in foster care that did not receive services within 21 days for a total of 23 members. The AHCCCS Clinical Resolutions Unit, and DCS CHP, and the ACC health plans worked diligently to address the barriers identified by facilitating communication, providing training, identifying alternative providers, expanding their provider networks, and executing single case agreements when needed. The AHCCCS Clinical Resolutions Unit encounters a variety of factors that may contribute to members not receiving service within 21 calendar days, including communication challenges, failure to make the referral in a timely manner, member transition to a new home or community, multiple siblings removed with differing needs, family requesting services with a particular provider, provider or appointment availability, availability of in-person services, specialty service providers, and appointment conflicts with previously scheduled appointments.

Services Accessed Out of Network

The statute allows members to access providers outside DCS CHP's contracted network of providers. If an initial behavioral health service is not provided within 21 calendar days, the out-of-home placement or adoptive parent shall contact the plan of enrollment and AHCCCS customer service to document the failure. After contacting the plan of enrollment and AHCCCS, the member may receive services directly from any AHCCCS registered provider, irrespective of the provider's contracted status. Upon submission of the claim to the plan of enrollment for payment, the provider must accept the lesser of 130 percent of the AHCCCS FFS rate or the provider's standard rate.

Since the enactment of Jacob's Law, AHCCCS is not aware of any providers formerly contracted with DCS CHP that decided to terminate their contract to provide services pursuant to this law at 130 percent of the AHCCCS FFS rate. Additionally, AHCCCS has expended no funding on services to out-of-network providers pursuant to the law, which, as stated directly above, allows out-of-network providers to be reimbursed the lesser of 130 percent of the AHCCCS FFS rate or the provider's standard rate. From April 2023 through March 2024, no members were identified as accessing services by a non-contracted provider pursuant to the law.


Summary

This report demonstrates that children in foster care and their families continue to be able to access behavioral health services, including crisis services. This is attributed in large part to the integrated model under DCS CHP, and ongoing member and provider education on behavioral health access and the availability of services. DCS CHP continues to proactively ensure children have access to timely services through the 21 Day Escalation and Reporting Process and real-time support to providers and the CFT process with accessing care. DCS CHP also continues to create more informational opportunities with events for providers, community advocates, and families to learn and better understand the requirements of Jacob's Law regarding timely service delivery in coordination with their Foster Care Liaisons and Children's System of Care meetings. During the reporting period, AHCCCS also completed 13 trainings on Jacob's Law, reaching 893 participants across the state.

AHCCCS will continue to monitor these outcomes to ensure availability and access to services for children in foster care and adopted.

Please do not hesitate to contact me if I can answer any questions or provide additional information.

Sincerely,



Carmen Heredia,
Cabinet Executive Officer
and Executive Deputy Director

cc: The Honorable Warren Petersen, President, Arizona Senate
The Honorable Ben Toma, Speaker, Arizona House of Representatives
Richard Stavneak, Director, Joint Legislative Budget Committee
Sarah Brown, Director, Governor's Office of Strategic Planning and Budgeting
Zaida Dedolph Piccoro, Health Policy Advisor, Office of the Governor