

**Arizona Department of Health Services  
Division of Behavioral Health Services  
PROVIDER MANUAL  
NARBHA Edition**

**Section 3.21**      **Service Package for Non-Title XIX/XXI Persons Determined to Have a Serious Mental Illness (SMI)**

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**3.21.1 Introduction**

In Arizona's public behavioral health system, persons may be eligible for, or entitled to services as Title XIX (Medicaid), Title XXI (KidsCare) or as a person determined to have a Serious Mental Illness (SMI). Non-Title XIX/XXI funds are available but limited to the amount appropriated by the Arizona legislature. Additionally, it is incumbent upon the public behavioral health system to ensure that Non-title XIX/XXI funding allocated by the Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS) for each geographic services area (GSA) is available for services throughout the fiscal year. As such, each Tribal and Regional Behavioral Health Authority (T/RBHA) must implement the following service package limitations for Non-Title XIX/XXI funded service delivery to persons determined to have SMI.

This section is intended to define standardized covered benefits for Non-Title XIX/XXI funded services for persons determined to have SMI to be applied consistently across the state. The covered benefits define ADHS/DBHS' expectations regarding the expenditure of Non-Title XIX/XXI funds for persons determined to have SMI.

**3.21.2 References**

The following citations can serve as additional resources for this content area:

[A.R.S. § 1-502](#)

[A.R.S. § 36-502\(D\)](#)

[A.R.S. § 36-3408](#)

[A.A.C. R9-20-209](#)

[ADHS/RBHA Contracts](#)

[ADHS/TRBHA IGAs](#)

[Substance Abuse Performance Partnership Block Grant](#)

[Section 3.1, Eligibility Screening for AHCCCS Health Insurance, Medicare Part D Prescription Drug Coverage, and the Limited Income Subsidy Program](#)

[Section 3.4, Co-payments](#)

[Section 3.5, Third Party Liability and Coordination of Benefits](#)

[Section 3.16, Medication Formularies](#)

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[Section 5.3, Grievance and Requests for Investigations for Persons Determined to have a Serious Mental Illness](#)

[Section 5.5, Notice and Appeal Requirements \(SMI and Non-SMI/Non-Title XIX/XXI\)  
ADHS/DBHS Covered Behavioral Health Services Guide](#)

### **3.21.3 Scope**

#### **To whom does this apply?**

To enrolled behavioral health recipients determined to have SMI receiving Non-Title XIX/XXI services and Non-Title XIX/XXI persons determined SMI undergoing court ordered evaluation (COE) and/or court ordered treatment (COT). This does not apply to individuals not eligible for public behavioral health services (see [A.R.S. § 1-502](#) and [A.R.S. § 36-3408](#)).

### **3.21.4 Did you know...?**

ADHS/DBHS receives limited Non-Title XIX/XXI service funds from a variety of sources. Non-Title XIX/XXI service fund sources include, but are not limited to:

- Center for Mental Health Services (CMHS) and Substance Abuse Prevention and Treatment (SAPT) Federal Block Grants;
- State appropriations for children, adults (including persons determined to have a Serious Mental Illness), substance abuse treatment and prevention;
- County and city funds;
- Other state agency funding agreements; and
- Other Non-Title XIX/XXI funds as made available periodically for targeted activities.

Non-Title XIX/XXI service funds do not include discretionary grant funds for specific grant projects.

State law does not permit the expenditure of state monies in excess of the amount that has been appropriated by the state legislature.

Behavioral health providers must screen behavioral health recipients for Title XIX eligibility. Providers can utilize the [Health-e Arizona web tool](#) to verify potential eligibility and submit behavioral health recipient's information for formal eligibility determination and screening for other public assistance programs simultaneously. RBHAs must maintain a resource list of providers with a sliding fee scale and associated services, as well as other community resources, that may be available to individuals who do not qualify for coverage through the Arizona Health Care Cost Containment System (AHCCCS, Arizona's Medicaid program).

Non-Title XIX/XXI persons determined to have SMI must be eligible for services and provide documentation of lawful presence in the United States, in accordance with [A.R.S. § 1-502\(A\)](#).

# Arizona Department of Health Services

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Crisis services are provided when a person presents with a sudden, unanticipated, or potentially dangerous behavioral health condition, episode or behavior. Crisis services are provided to any person presenting with a behavioral health crisis in the community, regardless of eligibility or enrollment status.

### 3.21.5 Definitions

[ADHS/DBHS Non-Title XIX/XXI Medication Formulary](#)

[Medically Necessary Covered Services](#)

[Serious Mental Illness](#)

### 3.21.6 Objectives

To communicate Non-Title XIX/XXI funded, covered behavioral health services for persons determined to have a Serious Mental Illness (SMI).

### 3.21.7 Procedures

#### 3.21.7-A: General Requirements

ADHS/DBHS requires adherence to the following statewide covered service package for Non-Title XIX/XXI funded service delivery to persons determined to have a Serious Mental Illness:

- A Non-Title XIX/XXI medication formulary (see [Section 3.16, Medication Formularies](#));
- Medically necessary laboratory services (see the [ADHS/DBHS Covered Behavioral Health Services Guide](#));
- Psychiatric assessments;
- Psychiatric follow up appointments for medication management;
- Telephone contact by prescribing medical professionals (MD, DO, NP, PA) or nursing staff (RN, LPN);
- Nursing (RN, LPN) assistance for prescribing medical professionals and medication administration; and
- Oral interpretation and sign language services to ensure services are provided to persons in their preferred language.

Services identified for Non-Title XIX/XXI persons determined to have SMI are state-funded services, and as such, providers must ensure that individuals requesting these services are eligible to receive the services. Providers must screen individuals for AHCCCS eligibility and, as applicable, assist individuals with applying for AHCCCS and/or enrolling in Medicare Part D (see [Section 3.1, Eligibility Screening for AHCCCS Health Insurance, Medicare Part D Prescription Drug Coverage and the Limited Income Subsidy Program](#)). Individuals who refuse to participate in the AHCCCS screening and eligibility application process or to enroll in a Medicare Part D plan are ineligible for state funded behavioral health services. In addition, providers must obtain documentation from individuals during the screening process to verify lawful presence in the United States. Individuals unable to provide such documentation to verify citizenship or lawful presence are not eligible for state funded behavioral health services.

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**3.21.7-B: Medications and Medication Management**

Coverage of medications through the public behavioral health system is limited to the [ADHS/DBHS Non-Title XIX/XXI Medication Formulary](#) (see also [Section 3.16, Medication Formularies](#)) for Non-Title XIX/XXI persons determined to have SMI. However, Non-Title XIX/XXI persons determined to have SMI who have third party coverage, such as Medicare or private insurance, will continue to have access to medications on their health plan's formulary through their third party insurer (see [Section 3.5, Third Party Liability and Coordination of Benefits](#) for additional information regarding third party liability). For individuals without third party coverage, coverage of the cost of brand medications will be the responsibility of the person. However, providers may contact **NARBHA** for information on pharmaceutical assistance programs that offer no-cost or reduced-cost brand name medications:

Laboratory services may be necessary in conjunction with prescribing medications and to ensure effective medication monitoring. As such, laboratory services listed within the [ADHS/DBHS Covered Behavioral Health Services Guide](#) are covered for Non-Title XIX/XXI persons determined to have SMI. In addition to laboratory services, prescribing medical professionals and/or nursing staff will provide medication management services to Non-Title XIX/XXI persons determined SMI as indicated in section II.C.3 of the [ADHS/DBHS Covered Behavioral Health Services Guide](#). Telephone evaluation and management services are also covered and provided in accordance with section II.D.1 of the [ADHS/DBHS Covered Behavioral Health Services Guide](#).

Non-Title XIX/XXI persons determined SMI may be assessed a co-payment at the time of their appointment for psychiatric follow up visits in accordance with [Section 3.4, Co-payments](#).

**3.21.7-C: Psychiatric Assessments**

Providers will complete psychiatric assessments with newly enrolled Non-Title XIX persons determined to have SMI and when the care of a Non-Title XIX/XXI person determined SMI is transferred to another behavioral health professional. Psychiatric assessments must also be reviewed and updated at least once every 12 months. Psychiatric assessments are provided in accordance with section II.C.3 of the [ADHS/DBHS Covered Behavioral Health Services Guide](#) and must be in compliance with [A.A.C. R9-20-209](#).

Providers must additionally collect demographic information as required in the [ADHS/DBHS Demographic Data Set User Guide](#) when conducting a psychiatric assessment, when significant changes occur in a behavioral health recipient's status and at least annually.

Non-Title XIX/XXI persons determined SMI may be assessed a co-payment at the time of their appointment for psychiatric assessments in accordance with [Section 3.4, Co-payments](#).

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