Out of State Placements for Children and Young Adults

3.22.1 Introduction
At times, it may be necessary to consider an out-of-state placement for a child or young adult to meet the person’s unique circumstances or clinical needs. The following factors may lead a person’s Child and Family Team (CFT) or Adult Recovery Team (ART) to consider the temporary out-of-state placement of a child or young adult.

- A child or young adult needs specialized programming not currently available in Arizona to effectively treat a specified behavioral health condition;
- An out-of-state placement’s approach to treatment incorporates and supports the child’s or young adult’s unique cultural heritage;
- A lack of current in-state bed capacity; and/or
- Geographical proximity encourages support and facilitates family involvement in the person’s treatment.

The Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS) expects that decisions to place children or young adults in out-of-state placements for behavioral health care and treatment are examined closely and made after the CFT or ART have reviewed all other in-state options. Other options may include single case agreements with in-state providers that would allow enhanced programming or staffing to meet the specific needs of the person or the development of an Individual Service Plan (ISP) that incorporates a combination of support services and clinical interventions and takes advantage of the full extent of all available covered services to meet the clinically identified needs of the child or young adult. In the event that an out-of-state placement is necessary and supported by the CFT or ART, Tribal and Regional Behavioral Health Authorities (T/RBHA) and their providers must follow the steps and procedures outlined in this section. Services provided out-of-state must meet appointment standards and timelines specified in Section 3.2, Appointment Standards and Timeliness of Service.
3.22.2 Terms
Definitions for terms are located online at http://www.azdhs.gov/bhs/definitions/index.php and Northern Arizona Regional Behavioral Health Authority. The following terms are referenced in this section:

Adult Recovery Team (ART)

Child and Family Team

Individual Service Plan (ISP)

Prior Authorization (PM 3.22)

Single Case Agreement

3.22.3 Procedures
3.22.3-A. General requirements
When the T/RBHA is considering an out-of-state placement for a child or young adult, the following conditions apply:

- The CFT or ART will consider all applicable and available in-state services and determine that the services do not adequately meet the specific needs of the person;
- The person’s family/guardian (not including those not under guardianship between 18 and under 21 years of age) is in agreement with the out-of-state placement;
- The out-of-state placement is registered as an AHCCCS provider;
- The out-of-state placement meets the Arizona Department of Education Academic Standards; and
- A plan for the provision of non-emergency medical care must be established.

3.22.3-B. Conditions before a referral for out-of-state placement is made
Documentation in the clinical record must indicate the following conditions have been met before a referral for an out-of-state placement is made:

- All less restrictive, clinically appropriate approaches have either been provided or considered by the CFT or ART and found not to meet the person’s needs;
- The CFT or ART has been involved in the service planning process and is in agreement with the out-of-state placement;
- The CFT or ART has determined how they will remain active and involved in service planning once the out-of-state placement has occurred;
A proposed ISP that includes a discharge plan has been developed that addresses the needs and strengths of the person (see Section 3.9, Assessment and Service Planning);

All applicable prior authorization requirements have been met (see Section 3.14, Securing Services and Prior Authorization);

The Arizona Department of Education has been consulted to ensure that the educational program in the out-of-state placement meets the Arizona Department of Education Academic Standards and the specific educational needs of the person;

Coordination has occurred with other state agencies involved with the person, including notification to the DDD Medical Director when the individual is enrolled DD eligible;

The person’s AHCCCS health plan behavioral Health Coordinator or heath care provider has been contacted and a plan for the provision of any necessary non-emergency medical care has been established and is included in the comprehensive clinical record;

The NARBHA’s Care Manager contacts the member’s Health Plan’s Behavioral Health Coordinator or medical provider to discuss the anticipated non-emergency medical care needs of the person so that a plan is developed to ensure that care can either be provided by the facility or that the Health Plan has contracted with another provider in the facility’s region.

Cultural considerations have been explored and incorporated into the ISP; and

In the event that a person has been placed out-of-state secondary to an emergency situation or unforeseen event, the NARBHA must address all above conditions as soon as notification of the out-of-state placement is received.

### 3.22.3-C. The Individual Service Plan (ISP)

For a person placed out-of-state, the ISP developed by the CFT or ART must require that:

- Discharge planning is initiated at the time of referral or notification of admission, including:
  - The measurable treatment goals being addressed by the out-of-state placement and the criteria necessary for discharge back to in-state services;

- The possible or proposed in-state residence where the person will be returning;

- The recommended services and supports required once the person returns from the out-of-state placement;

- What needs to be changed or arranged to accept the person for subsequent in-state placement that will meet the person’s needs;

- How effective strategies implemented in the out-of-state placement will be transferred to the persons’ subsequent in-state placement; and
The actions necessary to integrate the person into family and community life upon discharge.

The CFT or ART actively reviews the person’s progress with clinical staffings occurring at least every 30 days. Clinical staffings must include the staff of the out-of-state facility; the person’s family/guardian is involved throughout the duration of the placement. This may include family counseling in person or by teleconference or video-conference;

- The CFT or ART must ensure that essential and necessary health care services are provided; and
- Home passes are allowed as clinically appropriate and in accordance with the ADHS/DBHS Covered Behavioral Health Services Guide. For youth in Department of Child Safety (DCS) custody, home passes must be determined only in close collaboration with DCS.

3.22.3-D. Initial notification to ADHS/DBHS Office of Medical Management

NARHBA is required to obtain approval from ADHS/DBHS Office of Medical Management prior to referral to an out-of-state placement and upon discovering that an enrolled member is in an out-of-state facility.

- To assist in the process of notifying ADHS/DBHS Office of Medical Management, NARHBA requires Responsible Agencies to secure prior authorization in accordance with NARHBA Policy PM 3.14 Securing Services and Prior Authorization, in addition to providing information on the necessity of an out-of-state placement.
- Responsible Agencies are required to submit PM Form 3.22.1, Initial Out-of-State Placement Request to NARHBA’s Medical Management Department via secure e-mail to authorization@narbha.org.
  Once received from the Responsible Agency, NARHBA reviews for appropriateness of the request and submits the request to DBHSMEDICALMANAGEMENT@azdhs.gov.
- NARHBA Care Manager notifies the Responsible Agency of ADHS/DBHS’ decision to approve or deny the out of state placement request. NARHBA Care Managers will be assigned to each member placed in an out-of-state facility until the member has returned to Arizona.

3.22.3-E. Periodic updates to ADHS/DBHS Office of Medical Management

In addition to providing initial notification, NARHBA is required to submit updates to ADHS/DBHS Office of Medical Management regarding the member’s progress every thirty days and within 48 hours of notification of member discharge from an out-of-state facility.

To accomplish this monitoring requirement:

- NARHBA Care Managers attend monthly CFT or ART meetings for children receiving treatment in an out-of-state facility to monitor progress towards discharge goals.
NARBHA Care Managers complete and submit PM Form 408.1, Out-of-State Placement Form by secure e-mail to DBHSMEDICALMANAGEMENT@azdhs.org to provide periodic updates and discharges.

3.22.4 References
The following citations can serve as additional resources for this content area:
R9-21-101 et seq.
AHCCCS/ADHS Contract
ADHS/RBHA Contracts
ADHS/Tribal IGAs
Section 3.2 Appointment Standards and Timeliness of Service
Section 3.9, Assessment and Service Planning
Section 3.14, Securing Services and Prior Authorization
ADHS/DBHS Practice Protocol Child and Family Team Practice
ADHS/DBHS Covered Behavioral Health Services Guide
Arizona Department of Education Academic Standards
Guiding Principles for Recovery-Oriented Adult Behavioral Health Services and Systems

3.22.5 PM Forms
PM Form 3.22.1 Initial Out-of-State Placement Request Form
Reference ADHS/DBHS Policy 408