

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

**Section 3.7 Clinical Liaison**

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**3.7.1 Introduction**

ADHS/DBHS has adopted a service delivery model that includes a strength-based, family friendly and culturally sensitive approach to intake, assessment and service planning See [Section 3.9, Intake, Assessment and Service Planning](#). The provision of clinical input and supervision is recognized as one of the critical functions needed to support this overall approach for delivering behavioral health services. In order to enhance the effectiveness and to improve the consistency of clinical input and supervision within the behavioral health system, each enrolled person will be assigned a clinician (known as a Clinical Liaison). The Clinical Liaison's primary responsibility is to provide clinical oversight of the person's care, ensure the clinical soundness of the assessment/treatment process, and serve as the point of contact, coordinating and communicating with the person's team and other systems where clinical knowledge of the case is important.

**3.7.2 References**

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

[R9-20-204](#)

[R9-20-205 \(B\) and \(C\)](#)

[R9-20-101 \(15\)](#)

[R9-20-101 \[17 \(a\) \(c\) \(d\) and \(e\)\]](#)

[AHCCCS/ADHS Contract](#)

[ADHS/RBHA Contracts](#)

[ADHS/TRBHA IGAs](#)

[Child and Family Team Practice Improvement Protocol](#)

[Adult Clinical Team Practice Improvement Protocol](#)

[Child and Family Team Process Technical Assistance Document](#)

[Section 3.20, Credentialing and Privileging](#)

[Section 3.9, Intake, Assessment and Service Planning](#)

[Section 4.2, Behavioral Health Medical Record Standard](#)

[Section 4.3, Coordination of Care with AHCCCS Health Plans and Primary Care Providers and Medicare Providers](#)

[Section 4.4, Coordination of Care with Other Governmental Entities](#)

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**3.7.3 Scope**

**To whom does this apply?**

This standard applies to all persons who are enrolled in the ADHS/DBHS behavioral health system.

**3.7.4 Definitions**

[Clinical Liaison](#)

**3.7.5 Objectives**

The objective of this standard is to describe the roles and functions of the Clinical Liaison.

**3.7.6 Procedures**

**3.7.6-A: Roles and functions of the Clinical Liaison**

Each Clinical Liaison is responsible for the following:

- To provide clinical oversight to the team as it relates to the delivery of services for an enrolled person, including the assessment and service planning processes;
- To provide clinical oversight of the person's care;
- To work in collaboration with the person and his/her family or significant others to implement an effective service plan, explaining the available clinical options to the team, including the advantages and disadvantages of each option;
- To serve as the point of contact, coordinating and communicating with other individuals and/or entities, including, but not limited to, primary care providers, schools, child welfare systems, juvenile and adult probation agencies, etc., where clinical knowledge of the case is important. See [Section 4.3, Coordination of Care with AHCCCS Health Plans and Primary Care Providers and Medicare Providers](#) and [Section 4.4, Coordination of Care with Other Government Agencies](#).
- To ensure the clinical soundness of the assessment and service planning processes; including identifying the need for further or specialty evaluations and signing off on the person's Service Plan and annual update;
- To provide clinical oversight to ensure provision of all covered services identified on the Service Plan; referrals to community resources as appropriate; and continuity of care between inpatient and outpatient settings, services and supports, as applicable;
- To provide continuous evaluation of the effectiveness of treatment through the ongoing assessment of the person, considering input from the person and relevant others, resulting in modification to the Service Plan as necessary;
- To ensure the coordination of transfers out-of-area, out-of-state or to an Arizona Long Term Care System (ALTCS) contractor, as applicable;
- To ensure the development and implementation of transition, discharge and aftercare plans prior to discontinuation of behavioral health services;
- To serve as a participating member of the person's team when applicable and possible;
- To maintain the person's comprehensive clinical record See [Section 4.2, Behavioral Health Record Standards](#), including documentation of activities performed as part of the service

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delivery process (e.g., assessments, provision of services, coordination of care, discharge planning); and

- To function in other capacities as appropriate and determined by the team.

**3.7.6-B: What are the requirements to be a Clinical Liaison?**

A Clinical Liaison must either be a behavioral health professional or a behavioral health technician and meet the credentialing and privileging requirements as described in [Section 3.20, Credentialing and Privileging](#).

**3.7.6-C: Who is assigned to a Clinical Liaison?**

A Clinical Liaison must be assigned to each enrolled person at the initial intake appointment. The Clinical Liaison or other credentialed and privileged behavioral health technicians or credentialed and privileged behavioral health professionals qualified to conduct assessments, must conduct the initial assessment. The Clinical Liaison ensures that all necessary follow-up activities and transitions to subsequent services occur. It is recognized that the person assigned as the Clinical Liaison may change as the service plan of the person receiving behavioral health services is developed or modified. If changes in a person's Clinical Liaison do occur, behavioral health providers must ensure that the person's comprehensive clinical record is transitioned to the new Clinical Liaison see [Section 3.17, Transition of Persons](#).

**3.7.6-D: Identification of the Clinical Liaison**

Behavioral health providers must submit the name and telephone number of the person's Clinical Liaison to a centralized T/RBHA designated location. This information must be provided in a timely manner, must be accurate and must be updated as changes in the assignment occur. This information will contribute to coordination of care efforts with state agencies, health plans, PCPs, etc., when T/RBHAs receive inquiries regarding the identity of a person's Clinical Liaison.

NARBHA requires identification of a clinical liaison for each enrolled member. The data is transmitted electronically to NARBHA from the Service/Tribal Area Agencies using NARBHA's Admit Companion packet. The Admit Companion is due within 14 days of the date of intake. In most cases, the Admit Companion is received at the time the Admit 834 is received. An Admit companion will be rejected if the Clinical Liaison is not defined.

To verify accuracy of such date, the clinical liaison name and unique staff ID are received. The unique staff ID is verified using data collected by the Human Resources Department regarding credentialing.