



Section 5.4 **Special Assistance for Persons Determined to have a Serious Mental Illness (SMI)**

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5.4.1 Introduction

To establish uniform guidelines for:

- a. Identifying persons determined to have a Serious Mental Illness (SMI) who are in need of Special Assistance.
- b. Ensuring that persons in need of Special Assistance have their Special Assistance needs met; and
- c. Maintaining and disseminating required reports on persons in need of Special Assistance
- d. As applicable, Tribal/Regional Behavioral Health Authorities (T/RBHAs) must ensure that all subcontracted providers adhere to the requirements of this policy.

5.4.2 Terms

Definitions for terms are located online at <http://www.azdhs.gov/bhs/definitions/index.php> or <http://www.narbha.org/for-providers/provider-resources/provider-policy-manual/definitions>. The following terms are referenced in this section:

[ADHS/DBHS Office of Grievance and Appeals](#)

[ADHS/DBHS Office of Human Rights](#)

[Day](#)

[Disenrollment](#)

[Episode of Care](#)

[Human Rights Committees](#)

[Qualified Clinician](#)

[Serious Mental Illness](#)

[Special Assistance](#)

[Title XIX](#)



5.4.3 Procedures

- a. T/RBHAs, the Arizona State Hospital (AzSH) and subcontracted providers must identify and report to the Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS) 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 T/RBHA or behavioral health provider must still submit a notification to the OHR. T/RBHAs, AzSH, subcontracted providers and ADHS/DBHS Office of Grievance and Appeals (OGA) must ensure that the person designated to provide Special Assistance is involved at key stages.
- b. General Requirements
 - i. Criteria to deem a person to be in need of Special Assistance are as follows:
 1. A person determined to have a Serious Mental Illness (SMI) is in need of Special Assistance if he/she is unable to do any of the following:
 - a. Communicate preferences for services;
 - b. Participate effectively in individual service planning (ISP) or inpatient treatment discharge planning (ITDP); or
 - c. Participate effectively in the appeal, grievance, or investigation processes; and
 2. The person's limitations must 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).
 3. A person who is subject to a general guardianship has been found to be incapacitated under [A.R.S. § 14-5304](#) and therefore automatically satisfies the criteria for Special Assistance. Similarly, if a T/RBHA or subcontracted provider recommends a person with a SMI for a general guardianship (in accordance with [R9-21-206](#) and [A.R.S. § 14-5305](#)), the person automatically satisfies the criteria for Special Assistance.
 4. The existence of any of the following circumstances for an individual should prompt the T/RBHA, AzSH, or subcontracted provider to more closely review whether the person determined to have a SMI is in need of Special Assistance:
 - a. Developmental disability involving cognitive ability;
 - b. Residence in a 24 hour setting;
 - c. Limited guardianship or the T/RBHA or subcontracted provider is recommending and/or pursuing the establishment of a limited guardianship; or
 - d. Existence of a serious medical condition that affects his/her intellectual and/or cognitive functioning (such as dementia or traumatic brain injury).



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- ii. The following may deem a person to be in need of Special Assistance:
 - 1. A qualified clinician providing treatment for the person;
 - 2. A case manager of a T/RBHA or subcontracted provider
 - 3. A clinical team of a T/RBHA or subcontracted provider;
 - 4. A T/RBHA;
 - 5. A program director of a subcontracted provider; including AzSH;
 - 6. The Deputy Director of ADHS/DBHS; or
 - 7. A hearing officer assigned to an appeal involving a person determined to have a SMI.
- iii. When to Screen for Special Assistance
 - 1. T/RBHAs, 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 this subsection F. 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 the 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 and/or the person's dissatisfaction with a situation that could be addressed by one or more of these processes.
- iv. Documentation
 - 1. T/RBHAs, AzSH and subcontracted providers shall document in the clinical record each time a staff member screens an individual for Special Assistance, indicating the factors reviewed and the conclusion. If the conclusion is that the person is in need of Special Assistance, they must notify the Office of Human Rights (OHR) by completing [PM Form 5.4.1 Notification of Persons in Need of Special Assistance](#) in accordance with the procedures below.
 - 2. Before submitting PM Form 5.4.1, T/RBHAs and their subcontracted providers shall check if the person is already identified as Special Assistance. A notation of Special Assistance designation and a completed PM Form 5.4.1 should already exist in the clinical record. However; if it is unclear, subcontracted providers must review T/RBHA data or contact the T/RBHA to inquire about current status. T/RBHAs are required to maintain a database on persons in need of Special Assistance and share data with subcontracted providers on a regular basis (at a minimum quarterly).
- c. Notification Requirements to the Office of Human Rights
 - i. If a person is not correctly identified as Special Assistance, T/RBHAs, AzSH and subcontracted providers must submit Part A of Policy Form 5.4.1 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



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- assistance, the notification form must be submitted immediately with a notation indicating the urgency. T/RBHAs, 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.
- ii. 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 Policy Form 113.1 notification, the form should be submitted within the required timeframes, followed by submittal of the guardianship documentation.
 - iii. The OHR administration (Office Chief or Lead Advocate) reviews the notification form to ensure that it contains sufficient information detailing the criteria and responds to the T/RBHA and subcontracted providers by completing Part B of PM Form 5.4.1 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.
 - iv. The notification process is not complete until OHR completes Part B of the form and sends it back to the T/RBHA and subcontracted providers. The T/RBHAs and subcontracted providers should follow up with OHR if no contact is made or Part B is not received within five working days.
 - v. OHR designates which agency/person will provide Special Assistance when processing Policy Form 113.1. When the agency/person providing Special Assistance changes, OHR processes an “updated Part B” to document the change. In the event the person or agency currently identified as providing Special Assistance is no longer actively involved, the T/RBHA or subcontracted provider must notify OHR. If an OHR advocate is also assigned, notification to the advocate is sufficient.
- d. Persons no longer in need of Special Assistance
- i. T/RBHAs, AzSH or subcontracted providers must notify the OHR within ten days of an event or a 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:
 1. The reason(s) why Special Assistance is no longer required;
 2. The effective date;
 3. The name, title, phone number and e-mail address of the staff person completing the form; and
 4. The date the form is completed.
 - ii. The following are instances that should prompt T/RBHAs or subcontracted providers to submit a Part C:
 1. The original basis for the person meeting Special Assistance criteria is no longer applicable and the person does not otherwise meet criteria;
 - a. T/RBHA or subcontracted provider must first discuss the determination with the person or agency providing Special Assistance to obtain any relevant input;



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- b. 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 time period to appeal must have expired).
 - 2. The person passes away;
 - 3. The person's episode of care is ended with the T/RBHA (Non-Title XIX persons with a SMI will also be disenrolled) and the person is not transferred to another T/RBHA. T/RBHAs or subcontracted providers must first perform all required re-engagement efforts, which includes contacting the person providing Special Assistance, per NARBHA Policy 3.8 Outreach, Engagement, Re-Engagement and Closure. Proper notice and appeal rights must be provided and the time period to appeal must have expired prior to submission of Part C.
 - iii. Upon receipt of Part C of the Policy Form 113.1 OHR administrators review content to confirm accuracy and completeness and send it back to the agency that submitted it, copying any involved T/RBHA or subcontracted provider.
- e. Requirement of T/RBHAs, AzSH, Subcontracted Providers and ADHS/DBHS Office of Grievance and Appeals (OGA) to Help Ensure the Provision of Special Assistance
 - i. T/RBHAs, AzSH, subcontracted providers and ADHS/DBHS OGA 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:
 - 1. 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, doctor and case manager assignment);
 - 2. ISP development and updates: Must be in accordance with Policy 3.9 Assessment and Service Planning
 - 3. ITDP planning: Includes any time a person is admitted to a psychiatric inpatient facility and involvement throughout the stay and discharge;
 - 4. Appeal process: Includes circumstances that may warrant the filing of an appeal, so all notices of action (NOA) or notices of decisions (NOD) issued to the person/guardian must also be copied to the person designated to meet Special Assistance needs; and
 - 5. Investigation or grievance: Includes when an investigation/grievance is filed and circumstances when initiating a request for an investigation/grievance may be warranted.
 - ii. In the event that such procedures are delayed in order to ensure the participation of the person providing Special Assistance, the T/RBHAs, AzSH, subcontracted providers and DBHS OGA must document the reason for the delay in the clinical record, or the investigation, grievance or appeal file. If an emergency service is needed T/RBHAs, 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.



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- iii. T/RBHAs and subcontracted providers shall provide timely relevant details and a copy of the original Special Assistance Notification form (both Parts A and B) to the receiving entity and when applicable, case manager, when a person in need of Special Assistance is:
 - 1. admitted to an inpatient facility
 - 2. admitted to a residential treatment setting; or
 - 3. transferred to a different T/RBHA, case management provider site or case manager.
- iv. T/RBHAs and subcontracted providers must periodically review whether the person's needs are being met by the person or agency designated to meet the individual'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.
- f. ADHS/DBHS Office of Grievance and Appeals and RBHA Office of Grievance and Appeals Reporting Requirements
 - i. Upon receipt of a request for investigation, grievance or an appeal, the T/RBHAs' OGA and the ADHS/DBHS OGA must review whether the person is already identified as in need of Special Assistance.
 - ii. If so, the T/RBHA or ADHS/DBHS OGA must ensure that:
 - 1. A copy of the request for investigation or grievance is sent to OHR within five days of receipt of the request. The T/RBHA or ADHS/DBHS OGA must also forward a copy of the final grievance/investigation decision to the OHR within five days of issuing the decision.
 - 2. The results of the Informal conference (IC) regarding appeals are sent to OHR. The T/RBHA or ADHS/DBHS OGA shall also forward a copy of any subsequent notice of hearing.
- g. T/RBHA Reporting Requirements
 - i. T/RBHAs must maintain a copy of completed Form 113.1, Parts A, B and updated if any.
 - ii. T/RBHAs must maintain a database on individuals in need of Special Assistance to ensure compliance with this policy and the reporting requirements described in this section. This cannot be delegated to T/RBHA providers.
 - iii. The T/RBHA must, by the 10th calendar day of each month, provide the ADHS/DBHS OHR with a comprehensive report listing:
 - 1. All persons in need of Special Assistance who are active as of the end of the previous month;
 - 2. Any Part C notifications during the previous month that a person no longer needs Special Assistance;
 - 3. Any persons transferred to the T/RBHA during the previous month who were Special Assistance in the previous T/RBHA; and
 - 4. Any person in need of Special Assistance transferred from the T/RBHA to another T/RBHA.
 - iv. The monthly reports must contain the following information:
 - 1. CIS number
 - 2. Name;



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3. Date of Birth;
 4. Guardian (yes or no)
 5. Current address;
 6. Current phone number;
 7. Type of residence;
 8. Whether currently at AzSH & unit name;
 9. AzSH identification number;
 10. Name of provider;
 11. Name/location of provider site
 12. Name of case manager;
 13. Name of clinical supervisor;
 14. GSA (for RBHAs serving more than one);
 15. Title XIX (AHCCCS) enrollment status (yes or no)
 16. Effective date (date Part B was completed);
 17. Person/relationship or agency meeting Special Assistance needs;
 18. Name, address and phone number of person meeting the Special Assistance needs;
 19. If applicable, the date of discharge from AzSH
 20. 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;
 21. If applicable, information on any updated Part B (indicating change in person meeting needs); and
 22. If applicable, the date of the inter-RBHA transfer including the name of the receiving T/RBHA.
- v. By the 25th day of the month following the end of a quarter, OHR provides T/RBHAs with a comprehensive report for the previous quarter. The T/RBHAs, in response to OHR's quarterly report must:
1. Update the T/RBHA's database with data updates contained in the quarterly report for individuals assigned to an OHR advocate and submit an updated report to OHR by the 10th day of the next month, identifying any changes in client information for individuals not assigned to an OHR advocate that occurred during the previous quarter. Examples include change in Title XIX enrollment, changes in the individual's residence, case management provider or case manager assignment, etc. T/RBHAs and OHR work together to rectify any data discrepancies in a timely manner to ensure that the data maintained is accurate.
- vi. The ADHS OHR, utilizing data it maintains on all persons in need of Special Assistance, must provide a list of persons in each region to each HRC by the 25th calendar day of each month. The OHR customarily provides a courtesy copy of the report to the corresponding T/RBHA.
- vii. By the 15th of the month, OHR provides AzSH a list of persons in need of Special Assistance that were receiving services at AzSH during the previous month. AzSH must review the list for accuracy and provide a response by the 20th of the month, indicating any additions to the report, including information on discharges during the previous month. OHR provides the final report to the AzSH HRC and a copy to AzSH by the 25th of the month.
- viii. T/RBHAs must share Special Assistance data with its subcontracted providers that provide case management to individuals determined to have a SMI and

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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). T/RBHAs must also establish a process with such providers to obtain quarterly updates on individuals currently identified as Special Assistance to support the T/RBHAs quarterly data updates process with the OHR.

h. Confidentiality Requirements

- i. T/RBHAs, AzSH and subcontracted providers shall grant access to clinical records of persons in need of Special Assistance to the ADHS/DBHS OHR in accordance with all federal and state confidentiality laws. See NARBHA Policy 4.1 Confidentiality.
- ii. 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 ADHS/DBHS 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 NARBHA Policy 4.1 Confidentiality.

i. Other Procedures

- i. T/RBHAs, AzSH and subcontracted providers must maintain a copy of the completed Notification of Special Assistance form (both 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 T/RBHAs, AzSH and subcontracted providers must maintain a copy of the form in the comprehensive clinical record.
- ii. T/RBHAs, 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 an individual is identified as Special Assistance, the person assigned currently to provide Special Assistance, the relationship, contact information including phone number and mailing address.
- iii. 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.
- iv. T/RBHAs must implement quality management measures to ensure the T/RBHA and subcontracted providers implement the requirements of this policy. Audit tools and procedures must be shared with the ADHS/DBHS OHR administration prior to use to ensure they address
 1. the screening requirements,
 2. documentation requirements, and
 3. ensuring provision of Special Assistance requirements.
- v. T/RBHAs must ensure that all applicable T/RBHA and provider staff are trained regarding the requirements of Special Assistance. (See NARBHA Policy 9.1 Training Requirements).

