

June 27, 2022

Brian Zolynas
Division of Medicaid and Children's Health Operations
U.S. Department of Health & Human Services
Centers for Medicare & Medicaid Services
90 Seventh Street, Suite 5-300 (5W)
San Francisco, CA 94103-6707

RE: Arizona SPA # 22-0008, Crisis Intervention Services

Dear Mr. Zolynas:

Enclosed is State Plan Amendment (SPA) # 22-0008, Crisis Intervention Services. This SPA clarifies language on crisis intervention services, rather than adding new services, with an effective date of April 1, 2022.

Tribal Consultation and Public Notice Requirements for this SPA have been fulfilled and the corresponding documentation is provided below:

Tribal Consultation:

 $\underline{https://www.azahcccs.gov/AmericanIndians/Downloads/Consultations/Meetings/2022/05_12_2022QuarterlyTC.pdf}$

Public Notice: https://www.azahcccs.gov/AHCCCS/PublicNotices/CrisisInterventionServices.html

If there are any questions about the enclosed SPA, please contact Ruben Soliz at <u>ruben.soliz@azahccs.gov</u> or 602-417-4355.

Sincerely,

Dana Flannery Assistant Director

Arizona Health Care Cost Containment System (AHCCCS)

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL		1. TRANSMITTAL NUMBER 22-0008	2. STATE		
FOR: CENTERS FOR MEDICARE & MEDICAID SERV	VICES	3. PROGRAM IDENTIFICATION: TITLE <u>19</u> OF THE SOCIAL SECURITY ACT			
TO: CENTER DIRECTOR		4. PROPOSED EFFECTIVE DATE			
CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		April 1, 2022			
5. FEDERAL STATUTE/REGULATION CITATION		6. FEDERAL BUDGET IMPACT (A	mounts in WHOLE dollars)		
Section 1947(b) of the Social Security Act		a. FFY <u>22</u> \$ <u>0</u> b. FFY <u>23</u> \$ <u>0</u>			
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT		8. PAGE NUMBER OF THE SUPEI OR ATTACHMENT (If Applicable			
Attachment 3.1-A Limitations, Page 9(e)		Attachment 3.1-A Limitations, Page 9(e)			
SUBJECT OF AMENDMENT Adds clarifying language on Crisis Intervention Services	to the Sta	ite Plan.			
10. GOVERNOR'S REVIEW (Check One)					
GOVERNOR'S OFFICE REPORTED NO COMMENT SPECIFIED: COMMENTS OF GOVERNOR'S OFFICE I NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMIT		OTHER, AS			
11. SIGNATURE OF STATE AGENCY OFFICIAL	15.	RETURN TO			
and the second of the second o	Dar 801 Pho	Dana Flannery 801 E. Jefferson St, MD # 4200 Phoenix, AZ 85034			
12. TYPED NAME					
Dana Flannery					
13. TITLE					
Assistant Director					
14. DATE SUBMITTED: 6/27/22					
	CMS USE				
16. DATE RECEIVED	17.	DATE APPROVED			
PLAN APPROV	ED - ONE	COPY ATTACHED			
18. EFFECTIVE DATE OF APPROVED MATERIAL	19.	SIGNATURE OF APPROVING OFF	ICIAL		
20. TYPED NAME OF APPROVING OFFICIAL	21.	TITLE OF APPROVING OFFICIAL			
22. REMARKS					

Peer Support Services: Services provided by persons who have been consumers of the behavioral health system and who are at least 18 years old. Peer support may involve assistance with more effectively utilizing the service delivery system such as assisting with developing plans of care, accessing supports, partnering with professionals, overcoming service barriers or assisting the member to understand and cope with the member's disability, behavior coaching, role modeling and mentoring.

Providers: BHTs and BHPP's (See Staff Qualifications Section)

Limitations: BHT's and BHPP's are limited to providing this service under an ADHS licensed agency or a State Certified Community Service Agency.

As an additional limitation, these services can not be billed in combination with services in an institutional setting, residential treatment center, or behavioral health residential facility.

Crisis Intervention Services: Community-based mobile crisis intervention services are items and services, that are-

- (1) furnished to an individual otherwise eligible for medical assistance under the State plan who is-
 - (A) outside of a hospital or other facility setting; and
 - (B) experiencing a mental health or substance use disorder crisis;
- (2) furnished by a multidisciplinary mobile crisis team--
 - (A) that includes at least 1 behavioral health care professional who is capable of conducting an assessment of the individual, in accordance with the professional's permitted scope of practice under State law, and other professionals or paraprofessionals with appropriate expertise in behavioral health or mental health crisis response, including nurses, social workers, peer support specialists, and others, as designated by the State
 - (B) whose members are trained in trauma-informed care, de-escalation strategies, and harm reduction;
 - (C) that is able to respond in a timely manner and, where appropriate, provide--
 - (i) screening and assessment;
 - (ii) stabilization and de-escalation; and
 - (iii) coordination with, and referrals to, health, social, and other services and supports as needed, and health services as needed;
 - (D) that maintains relationships with relevant community partners, including medical and behavioral health providers, primary care providers, community health centers, crisis respite centers, and managed care organizations (if applicable); and
 - (E) that maintains the privacy and confidentiality of patient information consistent with Federal and State requirements; and

(3)	available 24	hours	per day,	every	day	of the	year

TN No. 22-xxxx	Approval Date:	Effective Date: April 1, 2022