

Special Assistance FAQ

What?

Special Assistance is the support provided by a designated representative, to a member who is unable, due to a specific condition, to communicate his/her preferences and/or to participate effectively in the development of his/her service plan, discharge plan, the Serious Mental Illness (SMI) appeal process and/or SMI grievance/investigation process.

Why?

To identify and assist members determined to have a SMI who are unable to independently take advantage of the services and rights protections provided for by the SMI rules in the <u>Arizona Administrative Code</u> (A.A.C. R9-21-101, *et seq.*).

When?

The Tribal or Regional Behavioral Health Authority (T/RBHA), Health Plan, contractor or provider must assess members to determine if a member meets the Special Assistance criteria on an on-going basis, but at a minimum:

- 1) Service Plan (SP) planning and review,
- 2) Inpatient Treatment and Discharge Plan (ITDP) planning (and when the person goes into an inpatient psychiatric setting), and
- 3) Investigation, grievance or appeal process (and when conditions exist that could result in the filing of a grievance or appeal).

The details of the assessment must be documented in the clinical record (which are subject to record requests) noting if the individual meets criteria and how or how not.

Who?

The T/RBHA, Health Plan, contractor or provider assess for Special Assistance. For example, a Case Manager can complete an assessment for Special Assistance. For a comprehensive list of individuals or entities that may determine if a member meets the criteria for Special Assistance, refer to AMPM 320-R under General Requirements (#3).

Meeting Criteria for Special Assistance:

- 1) The member has been determined to have a Serious Mental Illness, and
- 2) The member is <u>unable</u> to communicate preferences and/or participate effectively in SP, ITDP, grievance and/or appeal processes; and
- 3) The individual's inability is due to a specific condition: cognitive ability/intellectual capacity, language barriers that an interpreter/translator cannot address, and/or medical condition (including severe psychiatric symptoms).
- 4) Members who have been deemed incapacitated pursuant to a guardianship (not including limited guardianship) automatically meet criteria for Special Assistance.

Proper assessment of the criteria will generally <u>not</u> result in identifying individuals who 1) need things explained in more basic terms, 2) are able but not willing to participate, 3) can speak and



advocate for themselves but present with interpersonal issues that make working with them challenging, 4) simply need more regular and effective engagement from the team or 5) have special needs.

Special needs are different from Special Assistance - special needs involve a person not speaking English, not knowing how to read/write, being deaf, hard of hearing, blind, or having a physical disability. The T/RBHA, Health Plan, contractors or providers must accommodate special needs – **no notification to OHR is required**.

How?

If the above criteria are met, the <u>next step</u> is to complete and submit the Special Assistance Notification (Part A section) in the AHCCCS QM Portal within five business days to notify OHR. For more information on how to submit a notification please refer to AMPM 320-R (B), *Process for Notification to the Office Human Rights*.

Prior to OHR final review, T/RBHA and Health Plans review the notification to ensure that it states the basis for meeting criteria and then OHR reviews and designates a person – <u>a guardian, family member, friend or an OHR Advocate</u> - to provide assistance and support to the member determined to need Special Assistance.

Responsibilities of the T/RBHA, Health Plan, Contractor, Provider, Clinical Team

- Ensure clear documentation in the health record and case management/member tracking system that a member is identified as in need of Special Assistance, the agency providing Special Assistance, and individual/agency assigned to meet this need, their relationship, and contact information including phone number and mailing address.
- Inform the individual in need of Special Assistance and explain the benefits of having another person involved to provide Special Assistance.
- Ensure open communication is maintained with the person providing Special Assistance (guardian, family member, friend or OHR advocate).
 - R9-21-104 (B.) Office of Human Rights; Human Rights Advocates:
 All clients shall have the right of access to a human rights advocate in order to understand, exercise, and protect their rights. The human rights advocate shall advocate on behalf of clients and shall assist clients in understanding and protecting their rights and obtaining needed services.
- Contact the person providing Special Assistance to involve them as required: Minimally, this involves providing timely notification to the individual providing Special Assistance to ensure involvement in the following:
 - In SP planning and review (includes anytime the person is making decisions about service options or proposed changes)
 - When a person goes to an inpatient psychiatric setting and for ITDP planning



- In a pending investigation, grievance or appeal (or when conditions exist that may support filing a grievance or appeal, such as a possible rights violation or failure to implement the SP or ITDP, denial of or change to a service, etc.).
- On an ongoing basis, assess whether members are in need of Special Assistance in accordance with the criteria set out in Policy AMPM 320-R. For more information on ongoing assessment for Special Assistance, please refer to AMPM 320-R under General Requirements (#4).
 - This includes ongoing assessments for current members receiving Special
 Assistance to ensure they continue to meet criteria. For more information on
 Members no longer in need of Special Assistance, please refer to AMPM 320-R
 under Notification Requirements and Process Flow for Members No Longer In
 Need of Special Assistance.
- For individuals already identified as in need of Special Assistance whose guardian, family member, or friend is providing Special Assistance, periodically review whether the assigned person is meeting the member's Special Assistance needs. If a concern arises, promptly address the individual/agency providing Special Assistance. If further action is needed to resolve, this may include contacting the T/RBHA, Health Plans, Contractors, or AHCCCS/DCAIR, OHR for assistance.

Responsibilities of the Designated Person Providing Special Assistance

- Maintain regular contact with the individual to discuss their needs and effectiveness of services received.
- When the OHR is designated to provide assistance, the OHR advocate communicates with the individual on a regular basis to discuss their needs, consent, understanding and effectiveness of services.
- The designated representative works with the clinical team to ensure services are provided and the individual's rights are protected.
- Attend team meetings, via phone or in person, with the individual in need of Special Assistance, when the meeting involves decisions about service options or proposed changes. The designated representative aligns with the member's decisions.
- Attend discharge planning meetings, via phone or in person, to help develop the ITDP when the individual in need of Special Assistance is in an inpatient psychiatric setting.
- While the clinical team is primarily responsible for communication, maintain regular contact with the clinical team, especially the individual's case manager.
- Be familiar with A.A.C. R9-21-101 *et seq*. and the SMI grievance/investigation and appeals processes to know 1) what rights the individual has and 2) how to enforce these rights by filing grievances and appeals on behalf of and/or with the member.
- Guardians, family members or friends, may contact the OHR for technical or direct assistance, information and resources to assist advocacy needs.



- The individual, a guardian or a designated representative can appeal the determination that an individual needs (or does not need) Special Assistance through the SMI appeal process.
- For members with court ordered guardianship please refer to ARS 14-5301 et seq.

Responsibilities of the Office of Human Rights

- Maintain a database on Special Assistance.
- Prepare reports on Special Assistance as follows:
 - Monthly reports for the Independent Oversight Committee (IOC) for each region
 - Quarterly reports for each T/RBHA for data reconciliation.
- Provide advocacy as needed to assigned Special Assistance members (see previous section).
- Review grievances and appeals filed by individuals in need of Special Assistance and provide assistance in the interview process and, resolving them, when needed and appropriate.
- When needed, provide technical or direct assistance by sharing information and resources on navigating the public behavioral health system in AZ for individual's guardian, family member or friend providing Special Assistance.

Other Requirements

- The IOCs for each region are responsible for making regular visits to the residential settings of Special Assistance individuals to ensure that their needs are being met and to determine their satisfaction with the care.
- IOC members <u>do not</u> need an Authorization for Release of Information (ROI) in order <u>to visit</u> individuals in need of Special Assistance, but they generally <u>need a ROI to view</u> records or obtain any information about the individual.
- The T/RBHA or Contractor Administration maintains data on individuals in need of Special Assistance to support the T/RBHA, Health Plan, contractor and providers in meeting their responsibilities.

Please visit the OHR webpage for other resources.



AHCCCS CONTACTS AND RESOURCES

RESOURCE LINKS

AHCCCS Medical Policy Manual (AMPM)

https://www.azahcccs.gov/shared/MedicalPolicyManual/

AHCCCS Contractors Operating Manual (ACOM)

https://www.azahcccs.gov/shared/ACOM/

Arizona Administrative Code (R9-21)

https://apps.azsos.gov/public_services/Title_09/9-21.pdf

AHCCCS/DCAIR OFFICE OF HUMAN RIGHTS

OHR Main Office Phone: 602-364-4585 or 800-421-2124 (toll free)

Email: OHRts@AZAHCCCS.GOV Mail: 801 E. Jefferson St. Phoenix, AZ 85034 MD 4200

The intent of this document is to provide general information to individuals determined to have a Serious Mental Illness receiving services in the Arizona's public behavioral health care system regarding their rights. It is not intended as a substitute for individual guidance or advice. Additionally, the AHCCCS/DCAIR Office of Human Rights is not a law firm.

AHCCCS CLINICAL RESOLUTION UNIT

602-364-4558 or 800-867-5808

LONG TERM CARE HEALTH PLANS (PROGRAM CONTRACTORS)		
Banner – University Family Care LTC Customer Service 1-833-318-4146 www.bannerufc.com	Mercy Care LTC Customer Services 1-800-624- 3879 www.mercycareaz.org	
United Healthcare LTC Customer Service 1-800-293- 3740 www.uhccommunityplan.com	Department of Economic Security/ Division of Developmental Disabilities (DES/DDD) Customer Service 1-800-770-9500 www.azdes.gov/ddd/	

REGIONAL BEHAVIORAL HEALTH AUTHORITY (RBHA) HEALTH PLANS		
Arizona Complete Health - Complete Care Plan RBHA Customer Service 1-888-788-4408 www.azcompletehealth.com/completecare	Mercy Care RBHA Customer Service 1-800-564- 5465 www.mercycareaz.org	Health Choice Arizona RBHA Customer Services 1-800-322- 8670 www.healthchoiceaz.com