

**Section 3, Chapter 900**  
**Policy 901, Inter-T/RBHA Coordination of Services**

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**1. PURPOSE:**

To promote an integrated behavioral health service delivery system throughout Arizona and to describe Tribal and Regional Behavioral Health Authority (T/RBHA) responsibilities for persons who require services in, or relocate to, another Geographic Service Area (GSA).

Coordination between T/RBHAs shall occur in a manner that ensures the provision of continuous covered behavioral health services that are consistent with treatment goals and identified needs for persons who:

- a. Receive services outside of the GSA served by their designated, T/RBHA (non-enrolled persons),
- b. Receive services outside of the GSA served by their home T/RBHA (enrolled persons), or
- c. Move to another GSA.

**2. TERMS:**

Definitions for terms are located online at <http://www.azdhs.gov/bhs/definitions/index.php>  
The following terms are referenced in this section:

Client Information System (CIS):

Enrollment

Designated T/RBHA

Home T/RBHA

Institution for Mental Disease (IMD)

Independent Living Setting

Inpatient Services

Out-of-Area Service

Residence

Residential Services

Transfer

**3. PROCEDURES:**

- a. General Provisions
  - i. Computation of Time – In computing any period of time prescribed or allowed by this policy, the period begins the day after the act, event, or decision occurs and includes all calendar days and the final day of the period. If the final day of the period is a weekend or legal holiday, the period is extended until the end of the next day that is not a weekend or a legal holiday. If the period of time is not designated as calendar days and is less than 11 days, then intermediate Saturdays, Sundays, and legal holidays must not be included in the computation.

**Section 3, Chapter 900**  
**Policy 901, Inter-T/RBHA Coordination of Services**

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- ii Persons enrolled with American Indian Tribal Governments that have an executed intergovernmental agreement with ADHS may choose to be enrolled and receive covered behavioral health services through either the Tribal RBHA or the off-reservation RBHA responsible for the GSA. As such, this contingency must be applied when implementing the requirements of this policy.
- iii T/RBHA Jurisdictional Responsibilities
  - (1) For adults (persons 18 years and older), T/RBHA jurisdiction is determined by the person's current place of residence, except persons who are unable to reside independently or are involved with the Arizona Department of Economic Security/Division of Developmental Disabilities (ADES/DDD) as described in Section c.i.(b) of this policy. This is applicable regardless of where the adult guardian resides.
  - (2) Responsibility for service provision, other than crisis services, remains with the home T/RBHA when the enrolled person is visiting or otherwise temporarily residing in a different T/RBHA area but:
    - (a) Maintains a place of residence in his or her previous location with an intent to return and
    - (b) The anticipated duration of the temporary stay is less than three months.
    - (c) When an Arizona Long Term Care System (ALTCS)/DDD member is placed temporarily in a group home while a permanent placement is being developed in the home T/RBHA service area, covered services remain the responsibility of the home T/RBHA.
  - (3) For children (ages 0-17 years), T/RBHA jurisdiction is determined by the current place of residence of the child's parent(s) or legal guardian.
  - (4) In a transfer, the home T/RBHA retains responsibility for service provision and coordination of care until such time as a person's record is closed for that T/RBHA.
  - (5) Inter-T/RBHA transfers must be completed within 30 days of referral by the home T/RBHA as described in Section c.iii. of this policy.
  - (6) The home T/RBHA must ensure that activities related to arranging for services or transferring a case does not delay a person's discharge from an inpatient or residential setting.

b. Out-of-Area Service Provision

i Crisis Services

Crisis services must be provided without regard to the person's enrollment status. The T/RBHA at which a person presents for crisis services must:

- (1) Provide needed crisis services and
- (2) Ascertain the person's enrollment status with all T/RBHAs and determine whether the person's residence in the current area is temporary or permanent.
  - (a) If the person is enrolled with another T/RBHA, notify the home T/RBHA within 24 hours of the person's presentation. The home T/RBHA is fiscally responsible for crisis services and must:

Section 3, Chapter 900  
Policy 901, Inter-T/RBHA Coordination of Services

---

- (i) Make arrangements with the T/RBHA at which the person presents to provide needed services, funded by the home T/RBHA,
  - (ii) Arrange transportation to return the person to the home T/RBHA area, or
  - (iii) Determine if the person intends to live in the new T/RBHA's geographic area and if so, initiate a transfer according to Section c.iii. of this policy. Persons who are unable to live independently but clearly express an intent/desire to permanently relocate to another service area can be transferred. However, the home T/RBHA must make arrangements for housing and consider this a temporary placement for three months. After three months, if the person continues to clearly express an intent/desire to remain in this new service area, the inter-T/RBHA transfer can proceed.
  - (b) If the person is not enrolled with any T/RBHA and lives within the service area of the T/RBHA at which the person presented for services, the T/RBHA must proceed with enrollment.
  - (c) If the person is not enrolled with any T/RBHA and lives outside of the service area of the T/RBHA at which the person presented for services, the T/RBHA must enroll the person, provide needed crisis services and initiate the inter-T/RBHA transfer.
  - (d) If a T/RBHA receives a referral regarding a hospitalized person whose residence is located outside the T/RBHA's GSA, the T/RBHA must immediately coordinate the referral with the person's designated T/RBHA.
- ii Non-emergency Services
- If the person is not enrolled with a T/RBHA, lives outside of the service area, and requires services other than a crisis or urgent response to a hospital, the T/RBHA must notify the designated T/RBHA associated with the person's residence within 24 hours of the person's presentation. The designated T/RBHA must:
- 1) Proceed with the person's enrollment if determined eligible for services. The designated T/RBHA is fiscally responsible for the provision of all medically necessary covered services including transportation services for eligible persons.
- iii Courtesy Dosing of Methadone
- A person receiving methadone administration services who is not a recipient of take-home medication may receive up to two courtesy doses of methadone from a T/RBHA while the person is traveling out of the home T/RBHA's area. All incidents of provision of courtesy dosing must be reported to the home T/RBHA. The home T/RBHA must reimburse the T/RBHA providing the courtesy doses upon receipt of properly submitted bills or encounters.
- iv Referral for Service Provision
- If a home T/RBHA initiates a referral to another T/RBHA or a service provider in another T/RBHA's area for the purposes of obtaining behavioral health services, the home T/RBHA must:
- (1) Maintain enrollment and financial responsibility for the person during the period of out-of-area behavioral health services,

**Section 3, Chapter 900**  
**Policy 901, Inter-T/RBHA Coordination of Services**

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- (2) Establish contracts with out-of-area service providers and authorize payment for services,
  - (3) Maintain the responsibilities of the behavioral health provider, and
  - (4) Provide or arrange for all needed services when the person returns to the home T/RBHA's area.
- c. Inter-T/RBHA Transfer
- i A transfer will occur when:
    - (1) An adult person voluntarily elects to change the person's place of residence to an independent living setting from one T/RBHA's area to another.
    - (2) Persons who are unable to live independently but clearly express an intent/desire to permanently relocate to another service area can be transferred. However, the home T/RBHA must make arrangements for housing and consider this a temporary placement for three months. After three months, if the person continues to clearly express an intent/desire to remain in this new service area, the inter-T/RBHA transfer can proceed.
    - (3) Persons who are unable to live independently and are involved with the ADES/DDD can be transferred to another T/RBHA. Persons involved with ADES/DDD who are permanently placed and reside in a supervised setting are the responsibility of the T/RBHA in which the supervised setting is located. This is applicable regardless of where the adult guardian lives.
    - (4) The parent(s) or legal guardian(s) of a child change their place of residence to another T/RBHA's area; or
    - (5) The court of jurisdiction of a dependent child changes to another T/RBHA's area.
  - ii Inter-T/RBHA transfers are not to be initiated when a person is under pre-petition screening or court ordered evaluation (see [Policy 109, Pre-petition Screening, Court Ordered Evaluation and Court Ordered Treatment](#)).
  - iii The home T/RBHA shall initiate a referral for an Inter-T/RBHA transfer:
    - (1) 30 days prior to the date the person will move to the new area; or
    - (2) If the planned move is in less than 30 days, immediately upon learning of the person's intent to move.
  - iv The referral is initiated when the home T/RBHA provides a completed Inter-T/RBHA Transfer Request Form ([Policy 901, Attachment A](#)). In addition, the following information must be provided to the receiving T/RBHA as quickly as possible:
    - (1) The person's comprehensive clinical record,
    - (2) Consents for release of information pursuant to [Policy 1401, Confidentiality](#);
    - (3) For Title XIX eligible persons between the ages of 21 and 64, the number of days the person has received services in an IMD in the contract year (July 1 – June 30), and
    - (4) The number of hours of respite care the person has received in the contract year (July 1 – June 30);
    - (5) The receiving T/RBHA must not delay the timely processing of an Inter-T/RBHA transfer because of missing or incomplete information.

**Section 3, Chapter 900**  
**Policy 901, Inter-T/RBHA Coordination of Services**

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- v Upon receipt of the transfer packet, the receiving T/RBHA must:
  - (1) Notify the home T/RBHA within seven calendar days of receipt of the referral for Inter-T/RBHA transfer,
  - (2) Proceed with making arrangements for the transfer, and
  - (3) Notify the home T/RBHA if the information contained in the referral is incomplete.
- vi Within 14 days of receipt of the referral for Inter-T/RBHA transfer, the receiving T/RBHA must:
  - (1) Schedule a meeting to establish a transition plan for the person. The meeting must include:
    - (a) The person or the person's guardian or parent, if applicable,
    - (b) Representatives from the home T/RBHA,
    - (c) Representatives from the Arizona State Hospital (AzSH), when applicable,
    - (d) The behavioral health provider and representatives of the CFT/Adult Team,
    - (e) Other involved agencies, and
    - (f) Any other relevant participant at the person's request or with the consent of the person's guardian.
  - (2) Establish a transition plan that includes at least the following:
    - (a) The person's projected moving date and place of residence,
    - (b) Treatment and support services needed by the person and the timeframe within which the services are needed,
    - (c) determination of the need to request a change of venue for court ordered treatment and who is responsible for making the request to the court, if applicable,
    - (d) Information to be provided to the person regarding how to access services immediately upon relocation,
    - (e) The enrollment date, time, and place at the receiving T/RBHA and the formal date of transfer, if different from the enrollment date,
    - (f) The date and location of the person's first service appointment in the receiving T/RBHA's GSA,
    - (g) The individual responsible for coordinating any needed change of health plan enrollment, primary care provider assignment, and medication coverage,
    - (h) The person's behavioral health provider in the receiving T/RBHA's GSA, including information on how to contact the behavioral health provider,
    - (i) Identification of the person at the receiving T/RBHA who is responsible for coordination of the transfer, if other than the person's behavioral health provider,
    - (j) Identification of any special authorization required for any recommended service (e.g., non-formulary medications) and the individual who is responsible for obtaining needed authorizations, and
    - (k) If the person is taking medications prescribed for the person's behavioral health issue, the location and date of the person's first appointment with a practitioner who can prescribe medications. There must not be a gap in the availability of prescribed medications to the person.

**Section 3, Chapter 900**  
**Policy 901, Inter-T/RBHA Coordination of Services**

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- vii On the official transfer date, the home T/RBHA must enter a closure and disenrollment into CIS. The receiving T/RBHA must enter an intake and enrollment into CIS at the time of transfer. If the person scheduled for transfer is not located or does not show up for his/her appointment on the date arranged by the T/RBHAs to transfer the person, the T/RBHAs must collaborate to ensure appropriate re-engagement activities occur (see [Policy 104, Outreach, Engagement, Re-Engagement and Closure](#)) and proceed with the inter-T/RBHA transfer, if appropriate. Each T/RBHA must designate a contact person responsible for the resolution of problems related to enrollment and disenrollment.
  - viii When a person presents for crisis services, providers must first deliver needed behavioral health services and then determine eligibility and T/RBHA enrollment status. Persons enrolled after a crisis event may not need or want ongoing behavioral health services through the T/RBHA. Providers must conduct re-engagement efforts as described in [Policy 104, Outreach, Engagement, Re-engagement and Closure](#), however; persons who no longer want or need ongoing behavioral health services must be disenrolled (i.e., closed in the CIS) and an inter-T/RBHA transfer must not be initiated. Persons who will receive ongoing behavioral health services will need to be referred to the appropriate T/RBHA and an inter-T/RBHA transfer initiated, if the person presented for crisis services in a GSA other than where the person resides.
  - ix Timeframes specified in Section c.iii., cover circumstances when behavioral health recipients inform their provider or T/RBHA prior to moving to another service area. When behavioral health recipients inform their provider or T/RBHA less than 30 days prior to their move or do not inform their provider or T/RBHA of their move, the designated T/RBHA must not wait for all of the documentation from the previous T/RBHA before scheduling services for the behavioral health recipient.
- d. Complaint Resolution
- i A person determined to have a Serious Mental Illness that is the subject of a request for out-of-area service provision or Inter-T/RBHA transfer may file an appeal as provided for in, [Policy 1801, Title XIX/XXI Notice and Appeal Requirements](#).
  - ii Any party involved with a request for out-of-area service provision or Inter-T/RBHA transfer may initiate the complaint resolution procedure. Parties include the home T/RBHA, receiving T/RBHA, person being transferred, or the person's guardian or parent, if applicable; the Arizona State Hospital (AzSH), if applicable, and any other involved agencies.
  - iii The following issues may be addressed in the complaint resolution process:
    - (1) Any timeframe or procedure contained in this policy,
    - (i) (2) Any dispute concerning the level of care needed by the person, and

**Section 3, Chapter 900**  
**Policy 901, Inter-T/RBHA Coordination of Services**

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- (3) Any other issue that delays the person's discharge from an inpatient or residential setting or completion of an Inter-T/RBHA transfer.
- iv Procedure for Non-emergency Disputes
  - (1) First Level
    - (a) A written request for the complaint resolution process shall be addressed to:
      - (i) The person's behavioral health provider at the home T/RBHA, or other individual identified by the T/RBHA, if the issue concerns out-of-area service provision or
      - (ii) The identified behavioral health provider at the receiving T/RBHA, or other individual identified by the T/RBHA, if the issue concerns an Inter-T/RBHA transfer.
    - (b) The behavioral health provider must work with involved parties to resolve the issue within five days of receipt of the request for complaint resolution.
    - (c) If the problem is not resolved, the behavioral health provider must, on the fifth day after the receipt of the request, forward the request for complaint resolution to the second level.
  - (2) Second Level
    - (a) Issues concerning out-of-area service provision must be forwarded to the Chief Executive Officer, or designee, of the home T/RBHA.
    - (b) Issues concerning Inter-T/RBHA transfers must be forwarded to the Chief Executive Officer, or designee, of the receiving T/RBHA.
    - (c) The Chief Executive Officer must work with the Chief Executive Officer of the other involved T/RBHA to resolve the issue within five days of receipt of the complaint resolution issue.
    - (d) If the problem is unresolved, the Chief Executive Officer must, on the fifth day after the receipt of the request, forward the request to the Deputy Director of the DBHS.
  - (3) Third Level
    - (a) The Deputy Director of the DBHS, or designee, will convene a group of financial and/or clinical personnel as appropriate to the complaint resolution issue to address and resolve the issue.
    - (b) The Deputy Director will issue a final decision within five days of receipt of the request.
- v Procedure for Emergency Disputes

An emergency dispute includes any issue in which the person is at risk of decompensation, loss of residence, or being in violation of a court order. The home T/RBHA must ensure that medically necessary behavioral health services continue pending the resolution of an emergency dispute between T/RBHAs.

  - (1) First Level
    - (a) Issues concerning out-of-area service provision must be forwarded to the Chief Executive Officer, or designee, of the home T/RBHA.
    - (b) Issues concerning Inter-T/RBHA transfers must be forwarded to the Chief Executive Officer, or designee, of the receiving T/RBHA.

**Section 3, Chapter 900**  
**Policy 901, Inter-T/RBHA Coordination of Services**

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- (c) The Chief Executive Officer must work with the Chief Executive Officer of the other involved T/RBHA to resolve the issue within two days of receipt of the complaint resolution issue.
- (d) If the problem is unresolved, the Chief Executive Officer must, on the second day after the receipt of the request, forward the request to the Deputy Director of the DBHS.
- (2) Second Level
  - (a) The Deputy Director of the DBHS, or designee, will convene a group of financial and/or clinical personnel as appropriate to the complaint resolution issue, to address and resolve the issue.
  - (b) The Deputy Director will issue a final decision within two days of receipt of the request.

**4. REFERENCES:**

[42 C.F.R. § 435.10](#)

[9 A.A.C. 20](#)

[AHCCCS/ADHS Contract](#)

[ADHS/RBHA Contracts](#)

[ADHS/TRBHA IGAs](#)

[Policy 104, Outreach, Engagement, Re-Engagement and Closure](#)

[Policy 109, Pre-petition Screening, Court Ordered Evaluation and Court Ordered Treatment](#)

[Policy 1401, Confidentiality](#)

[Policy 1801, Title XIX/XXI Notice and Appeal Requirements](#)