

April 2, 2026

The Honorable Katie Hobbs
Governor of Arizona
1700 West Washington
Phoenix, Arizona, 85007

The Honorable Warren Petersen
President of the Arizona State Senate
1700 W Washington
Phoenix, Arizona 85007

The Honorable Steve Montenegro
Speaker of the Arizona House of Representatives
1700 W Washington
Phoenix, Arizona 85007

Dear Governor Hobbs, President Petersen, and Speaker Montenegro,

AHCCCS respectfully submits the following report regarding members with a Serious Mental Illness (SMI) designation who received behavioral health services pursuant to Laws 2024, Chapter 163, ([SB 1311](#)) – ARS §36-502 (C) which states:

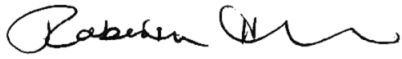
C. The Director shall adopt rules, if necessary, and prescribe reporting requirements and standards for contractors and contracted agencies to collect, report and analyze information and data for the purpose of understanding the clinical effectiveness of services provided by the various agencies pursuant to this chapter. The administration shall analyze the information and data collected semiannually and shall report annually to the governor, the president of the senate and the speaker of the house of representatives beginning on or before December 31, 2025. For the purposes of this subsection, the information and data shall identify and measure clinical outcomes in the past year of members who have received a designation of Serious Mental Illness, including all of the following:

1. The number of hospitalizations and rehospitalizations, the facilities where admissions occurred and the average length of stay by admitting diagnosis, for members for whom the administration or its contractor is the primary payor.
2. The number and percentage of members with a mental health disorder and co-occurring substance use disorder diagnosis who were admitted, discharged and subsequently readmitted to an inpatient psychiatric facility within the preceding year, for members for whom the administration or its contractor is the primary payor.

3. The number and percentage of members whose Title XIX enrollment is placed in a no-pay status in a given year due to the member's incarceration status, stratified by the number of times enrollment is suspended.
4. The number of members for whom the administration or its contractor is notified of a release from incarceration and for whom the administration or its contractor conducts reach-in services.
5. The number of responses by the contracted crisis system that identify members with a Serious Mental Illness designation, including:
 - a. The number of crisis phone line calls received.
 - b. The number of mobile teams dispatched.
 - c. The number of members seen at psychiatric urgent care centers.
 - d. The number of members with two or more distinct crisis system episodes.
6. The number of member deaths, the death rate and the cause of death in the preceding year.
7. The number of members who are homeless, unsheltered or inadequately housed and for what period of time, as identified through homeless management information system data or other available sources identified by the administration.
8. The number of Title XIX members or Non-TXIX grant-funded members, separately delineated, who are:
 - a. Admitted to a behavioral health residential facility.
 - b. Discharged from a behavioral health residential facility.
 - c. For those members for whom the administration or its contractor is the primary payor, admitted to an inpatient psychiatric hospital within one year after discharge from the behavioral health residential facility.
9. The number and percentage of members who:
 - a. Have received a court order for treatment.
 - b. Have requested and received the removal of a Serious Mental Illness designation.
 - c. Have received court-ordered treatment and are adherent to the court-ordered treatment.
 - d. Did not receive a single behavioral health service.
10. The number of patients who have been discharged from the state hospital and admitted to a contracted psychiatric hospital within the preceding year.
11. The number of members who have been evaluated for a Serious Mental Illness eligibility determination, the number of members whose eligibility determination resulted in receiving a serious mental illness designation and the number of members whose eligibility determination resulted in not receiving a serious mental illness designation.
12. The number of members who are also enrolled in Medicare and when the member's Medicare enrollment became known to the administration, separately reported by Title XIX members or Non-TXIX members.

If you have any questions regarding the attached report, please feel free to contact Damien Carpenter, Chief Legislative Liaison, at (602) 396-0767.

Sincerely,

A handwritten signature in black ink, appearing to read 'Roberta Harrison', with a stylized flourish at the end.

Roberta Harrison
Interim Director

cc:
Meaghan Kramer, Health Policy Advisor, Office of the Governor

Senate Bill 1311 Legislative Serious Mental Illness (SMI) Monitoring Report¹

State Fiscal Year (SFY) 2025
(July 1, 2024 – June 30, 2025)

March 2026

¹ Microsoft Copilot was utilized during the drafting process of this report to assist with document structuring, detailed comparison of data, and professional language review. All content was reviewed and finalized by AHCCCS personnel.

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Background

Serious Mental Illness (SMI) refers to an individual who is over the age of 18 with a diagnosable mental, behavioral, or emotional disorder that substantially interferes with major life activities such as work, relationships, and self-care.² In Arizona, individuals are assessed face-to-face by behavioral health clinicians for qualifying diagnostic and functional impairment criteria via a determination process to receive an SMI designation. AHCCCS respectfully submits the following report regarding members with a Serious Mental Illness (SMI) designation who received behavioral health services pursuant to Laws 2024, Chapter 163, ([SB 1311](#)) – ARS §36-502 (C) which states:

C. The Director shall adopt rules, if necessary, and prescribe reporting requirements and standards for contractors and contracted agencies to collect, report and analyze information and data for the purpose of understanding the clinical effectiveness of services provided by the various agencies pursuant to this chapter. The administration shall analyze the information and data collected semiannually and shall report annually to the governor, the president of the senate and the speaker of the house of representatives beginning on or before December 31, 2025. For the purposes of this subsection, the information and data shall identify and measure clinical outcomes in the past year of members who have received a designation of Serious Mental Illness, including all of the following:

1. The number of hospitalizations and rehospitalizations, the facilities where admissions occurred and the average length of stay by admitting diagnosis, for members for whom the administration or its contractor is the primary payor.
2. The number and percentage of members with a mental health disorder and co-occurring substance use disorder diagnosis who were admitted, discharged and subsequently readmitted to an inpatient psychiatric facility within the preceding year, for members for whom the administration or its contractor is the primary payor.
3. The number and percentage of members whose Title XIX enrollment is placed in a no-pay status in a given year due to the member's incarceration status, stratified by the number of times enrollment is suspended.
4. The number of members for whom the administration or its contractor is notified of a release from incarceration and for whom the administration or its contractor conducts reach-in services.
5. The number of responses by the contracted crisis system that identify members with a Serious Mental Illness designation, including:
 - a. The number of crisis phone line calls received.
 - b. The number of mobile teams dispatched.
 - c. The number of members seen at psychiatric urgent care centers.
 - d. The number of members with two or more distinct crisis system episodes.
6. The number of member deaths, the death rate and the cause of death in the preceding year.
7. The number of members who are homeless, unsheltered or inadequately housed and for what period of time, as identified through homeless

²<https://www.samhsa.gov/mental-health/serious-mental-illness/about>

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management information system data or other available sources identified by the administration.

8. The number of Title XIX members or Non-TXIX grant-funded members, separately delineated, who are:
 - a. Admitted to a behavioral health residential facility.
 - b. Discharged from a behavioral health residential facility.
 - c. For those members for whom the administration or its contractor is the primary payor, admitted to an inpatient psychiatric hospital within one year after discharge from the behavioral health residential facility.
9. The number and percentage of members who:
 - a. Have received a court order for treatment.
 - b. Have requested and received the removal of a Serious Mental Illness designation.
 - c. Have received court-ordered treatment and are adherent to the court-ordered treatment.
 - d. Did not receive a single behavioral health service.
10. The number of patients who have been discharged from the state hospital and admitted to a contracted psychiatric hospital within the preceding year.
11. The number of members who have been evaluated for a Serious Mental Illness eligibility determination, the number of members whose eligibility determination resulted in receiving a serious mental illness designation and the number of members whose eligibility determination resulted in not receiving a serious mental illness designation.
12. The number of members who are also enrolled in Medicare and when the member's Medicare enrollment became known to the administration, separately reported by Title XIX members or Non-TXIX members.

Data requirements include bi-annual data analysis and monitoring activities by AHCCCS. Two sets of data for the periods July 1, 2024, through December 31, 2024, and January 1, 2025, and June 30, 2025 are presented in this report to support the specific data collection and analysis prescribed by SB 1311.

AHCCCS confirms that data collection and reporting were implemented prior to October 1, 2025.

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Hospitalizations and Rehospitalizations

The number of hospitalizations and rehospitalizations, the facilities where admissions occurred, and the average length of stay (ALOS) in days by admitting diagnosis, for AHCCCS members with an SMI designation are presented in Tables Ia and Ib.

Table Ia – SFY 2025 Hospitalizations and Rehospitalizations - 7/1/2024 To 12/31/2024

Outcome	Count	Average Length Of Stay (ALOS)
Number Of Hospitalizations	15,251	7.90
Number Of Rehospitalizations	3,780	11.08

Table Ia – SFY 2025 Hospitalizations and Rehospitalizations - 1/1/2025 To 6/30/2025

Outcome	Count	Average Length Of Stay (ALOS)
Number Of Hospitalizations	15,088	10.07
Number Of Rehospitalizations	3,582	10.73

For this report, rehospitalization is defined as the same member being readmitted to a hospital within 3 to 30 days after a previous discharge. As shown in Table Ia, there were 15,251 hospitalizations for members with an SMI designation during the first half of SFY 2025 with an average length of stay of 7.9 days. During this period 3,785 rehospitalizations occurred, representing 24.8% of the total hospitalizations. In the second half of SFY 2025, there were 15,088 hospitalizations with an average length of stay of 10.07 days. There were 3,582 rehospitalizations, which accounted for 23.7% of the total hospitalizations, with an average length of stay of 10.73 days.

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Hospitalizations By Facility

Table 1b – SFY 2025 Hospitalizations By Facility - 7/1/2024 To 12/31/24 ³					
Facility Name	Total Distinct Member Count	Top 3 Primary Admitting Diagnosis	Hospitalizations		
			Count	Days	ALOS
ABRAZO ARROWHEAD CAMPUS	11	R079 CHEST PAIN, UNSPECIFIED	5	10	2.00
		A419 SEPSIS, UNSPECIFIED ORGANISM	4	20	5.00
		E6601 MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	3	6	2.00
ABRAZO AZ HEART HOSPITAL	4	I110 HYPERTENSIVE HEART DISEASE WITH HEART FAILURE	3	8	2.67
		I2510 ATHSCL HEART DISEASE OF NATIVE CORONARY ARTERY W/O ANG PCTRS	2	11	5.50
		R112 NAUSEA WITH VOMITING, UNSPECIFIED	2	8	4.00
ABRAZO CENTRAL CAMPUS	30	A419 SEPSIS, UNSPECIFIED ORGANISM	17	148	8.71
		N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	11	33	3.00
		I214 NON-ST ELEVATION (NSTEMI) MYOCARDIAL INFARCTION	4	13	3.25
ABRAZO SCOTTSDALE CAMPUS	14	A419 SEPSIS, UNSPECIFIED ORGANISM	6	91	15.17
		L03116 CELLULITIS OF LEFT LOWER LIMB	5	19	3.80
		E6601 MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	4	5	1.25
ABRAZO SURPRISE HOSPITAL	1	R0602 SHORTNESS OF BREATH	1	2	2.00
ABRAZO WEST CAMPUS	18	A419 SEPSIS, UNSPECIFIED ORGANISM	10	71	7.10
		N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	6	12	2.00
		R079 CHEST PAIN, UNSPECIFIED	4	8	2.00
ADVENTHEALTH ORLANDO	1	R569 UNSPECIFIED CONVULSIONS	1	22	22.00
AGAVE RIDGE BEHAVIORAL HOSPITAL	13	F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	5	58	11.60
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	5	36	7.20
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	3	21	7.00
ARIZONA BRIDGE TO RECOVERY	37	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	22	358	16.27
		F209 SCHIZOPHRENIA, UNSPECIFIED	13	190	14.62
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	6	60	10.00
ARIZONA GENERAL HOSPITAL	3	E871 HYPO-OSMOLALITY AND HYPONATREMIA	1	5	5.00

³ Admit diagnoses are ranked by highest Hospitalization Count, then by Average Length of Stay. Ties result in all tied diagnoses sharing the rank. The top 3 ranks are based on primary admitting diagnosis per facility and then the ALOS is represented for each of those top 3 admitting diagnoses.

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Table 1b – SFY 2025 Hospitalizations By Facility - 7/1/2024 To 12/31/24 ³					
Facility Name	Total Distinct Member Count	Top 3 Primary Admitting Diagnosis	Hospitalizations		
			Count	Days	ALOS
		A419 SEPSIS, UNSPECIFIED ORGANISM	1	4	4.00
		R109 UNSPECIFIED ABDOMINAL PAIN	1	4	4.00
ARIZONA REHAB CAMPUS, LLC	1	F10239 ALCOHOL DEPENDENCE WITH WITHDRAWAL, UNSPECIFIED	1	3	3.00
ARIZONA SPECIALTY HOSPITAL	1	M48062 SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION	1	3	3.00
AURORA BEHAVIORAL HEALTH	255	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	137	1,498	10.93
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	99	780	7.88
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	86	718	8.35
AURORA BEHAVIORAL HEALTHCARE	192	F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	91	829	9.11
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	73	866	11.86
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	67	672	10.03
AVENIR BEHAVIORAL HOSPITAL	106	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	78	658	8.44
		F209 SCHIZOPHRENIA, UNSPECIFIED	21	214	10.19
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	18	129	7.17
AVERA MCKENNAN HOSPITAL	1	F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	1	13	13.00
AXIOM CARE	45	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	27	106	3.93
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	19	57	3.00
		F1320 SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE, UNCOMPLICATED	4	13	3.25
AZ STATE HOSPITAL	5	F209 SCHIZOPHRENIA, UNSPECIFIED	5	122	24.40
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	1	31	31.00
BANNER - UNIVERSITY MEDICAL	97	F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	48	643	13.40
		R45851 SUICIDAL IDEATIONS	29	194	6.69
		F209 SCHIZOPHRENIA, UNSPECIFIED	23	359	15.61
BANNER BAYWOOD MEDICAL CENTER	23	A419 SEPSIS, UNSPECIFIED ORGANISM	15	111	7.40
		R4182 ALTERED MENTAL STATUS, UNSPECIFIED	5	43	8.60
		N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	5	18	3.60
BANNER BEHAVIORAL HEALTH	137	F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	50	392	7.84
		R45851 SUICIDAL IDEATIONS	46	366	7.96
		F319 BIPOLAR DISORDER, UNSPECIFIED	48	332	6.92

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Table 1b – SFY 2025 Hospitalizations By Facility - 7/1/2024 To 12/31/24 ³					
Facility Name	Total Distinct Member Count	Top 3 Primary Admitting Diagnosis	Hospitalizations		
			Count	Days	ALOS
BANNER BOSWELL MEDICAL CENTER	22	A419 SEPSIS, UNSPECIFIED ORGANISM	11	104	9.45
		R4182 ALTERED MENTAL STATUS, UNSPECIFIED	7	76	10.86
		J441 CHRONIC OBSTRUCTIVE PULMONARY DISEASE W (ACUTE) EXACERBATION	5	21	4.20
BANNER CASA GRANDE MEDICAL	11	A419 SEPSIS, UNSPECIFIED ORGANISM	5	33	6.60
		R0602 SHORTNESS OF BREATH	4	23	5.75
		J441 CHRONIC OBSTRUCTIVE PULMONARY DISEASE W (ACUTE) EXACERBATION	3	16	5.33
BANNER DEL E WEBB MED CENTER	55	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	24	377	15.71
		R45851 SUICIDAL IDEATIONS	22	268	12.18
		F209 SCHIZOPHRENIA, UNSPECIFIED	11	140	12.73
BANNER DESERT MEDICAL CENTER	46	A419 SEPSIS, UNSPECIFIED ORGANISM	29	123	4.24
		R4182 ALTERED MENTAL STATUS, UNSPECIFIED	10	49	4.90
		N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	9	52	5.78
BANNER ESTRELLA MEDICAL	28	A419 SEPSIS, UNSPECIFIED ORGANISM	16	73	4.56
		N390 URINARY TRACT INFECTION, SITE NOT SPECIFIED	8	39	4.88
		R0602 SHORTNESS OF BREATH	5	15	3.00
BANNER GATEWAY MEDICAL CENTER	11	E6601 MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	7	8	1.14
		K222 ESOPHAGEAL OBSTRUCTION	2	18	9.00
		M6282 RHABDOMYOLYSIS	2	11	5.50
BANNER GOLDFIELD MED CENTER	4	T8141XA INFECTION FOLLOWING A PROCEDURE, SUPERFICIAL	1	2	2.00
		A409 STREPTOCOCCAL SEPSIS, UNSPECIFIED	1	1	1.00
		E11649 TYPE 2 DIABETES MELLITUS WITH HYPOGLYCEMIA WITHOUT COMA	1	1	1.00
		T402X2A POISONING BY OTH OPIOIDS, INTENTIONAL SELF-HARM, INIT ENCNR	1	1	1.00
BANNER HEART HOSPITAL	3	J8489 OTHER SPECIFIED INTERSTITIAL PULMONARY DISEASES	1	17	17.00
		T8149XA INFECTION FOLLOWING A PROCEDURE, OTHER SURGIC	1	4	4.00
		R079 CHEST PAIN, UNSPECIFIED	1	3	3.00
BANNER IRONWOOD MEDICAL	8	A419 SEPSIS, UNSPECIFIED ORGANISM	4	22	5.50
		R109 UNSPECIFIED ABDOMINAL PAIN	2	5	2.50
		K920 HEMATEMESIS	2	3	1.50

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Table 1b – SFY 2025 Hospitalizations By Facility - 7/1/2024 To 12/31/24 ³					
Facility Name	Total Distinct Member Count	Top 3 Primary Admitting Diagnosis	Hospitalizations		
			Count	Days	ALOS
BANNER OCOTILLO MEDICAL	6	E871 HYPO-OSMOLALITY AND HYPONATREMIA	3	6	2.00
		A419 SEPSIS, UNSPECIFIED ORGANISM	2	14	7.00
		R109 UNSPECIFIED ABDOMINAL PAIN	2	9	4.50
BANNER PAYSON MEDICAL CENTER	7	A419 SEPSIS, UNSPECIFIED ORGANISM	3	8	2.67
		J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	3	8	2.67
		E1010 TYPE 1 DIABETES MELLITUS WITH KETOACIDOSIS WITHOUT COMA	2	9	4.50
BANNER REHABILITATION HOSPITAL	3	G8252 QUADRIPLÉGIA, C1-C4 INCOMPLETE	1	18	18.00
		S12100D UNSP DISP FX OF 2ND CERVCAL VERT, SUBS FOR FX W ROUTN HEAL	1	15	15.00
		Z4789 ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE	1	14	14.00
BANNER THUNDERBIRD MEDICAL	67	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	27	302	11.19
		A419 SEPSIS, UNSPECIFIED ORGANISM	25	159	6.36
		F319 BIPOLAR DISORDER, UNSPECIFIED	20	135	6.75
BANNER UNIVERSITY MEDICAL	43	A419 SEPSIS, UNSPECIFIED ORGANISM	32	249	7.78
		R0602 SHORTNESS OF BREATH	9	53	5.89
		E1010 TYPE 1 DIABETES MELLITUS WITH KETOACIDOSIS WITHOUT COMA	9	55	6.11
BANNER - UNIVERSITY MEDICAL	78	A419 SEPSIS, UNSPECIFIED ORGANISM	38	399	10.50
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	24	210	8.75
		N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	20	102	5.10
BARNES JEWISH HOSPITAL	1	N200 CALCULUS OF KIDNEY	1	4	4.00
BARSTOW COMMUNITY HOSP-CA	1	I110 HYPERTENSIVE HEART DISEASE WITH HEART FAILURE	1	3	3.00
BHC MESILLA VALLEY HOSPITAL	4	F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	2	17	8.50
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	2	12	6.00
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	1	6	6.00
BRYAN MEDICAL CENTER	1	F22 DELUSIONAL DISORDERS	1	8	8.00
BUENA VISTA	41	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	26	142	5.46
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	15	83	5.53
		F10129 ALCOHOL ABUSE WITH INTOXICATION, UNSPECIFIED	1	7	7.00

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Table 1b – SFY 2025 Hospitalizations By Facility - 7/1/2024 To 12/31/24 ³					
Facility Name	Total Distinct Member Count	Top 3 Primary Admitting Diagnosis	Hospitalizations		
			Count	Days	ALOS
BUENA VISTA RECOVERY	6	F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	5	28	5.60
		F1120 OPIOID DEPENDENCE, UNCOMPLICATED	3	14	4.67
BUENA VISTA RECOVERY	14	F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	7	30	4.29
		F1120 OPIOID DEPENDENCE, UNCOMPLICATED	6	17	2.83
		F1193 OPIOID USE, UNSPECIFIED WITH WITHDRAWAL	1	1	1.00
CALVARY HEALING CENTER	19	F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	16	68	4.25
		F1120 OPIOID DEPENDENCE, UNCOMPLICATED	12	78	6.50
		F1320 SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE, UNCOMPLICATED	1	4	4.00
CANYON VISTA RECOVERY CENTER	3	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	2	8	4.00
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	1	3	3.00
CANYON VISTA MEDICAL CENTER	20	F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	9	61	6.78
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	6	134	22.33
		F209 SCHIZOPHRENIA, UNSPECIFIED	6	50	8.33
CASA GRANDE INPATIENT	71	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	48	766	15.96
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	23	328	14.26
		F209 SCHIZOPHRENIA, UNSPECIFIED	23	179	7.78
CENTENNIAL HILLS HOSPITAL	1	R0602 SHORTNESS OF BREATH	1	1	1.00
CENTRAL CITY ADDICTION	65	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	38	346	9.11
		F209 SCHIZOPHRENIA, UNSPECIFIED	23	212	9.22
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	13	133	10.23
CHANDLER REGIONAL MEDICAL CENTER	18	R4182 ALTERED MENTAL STATUS, UNSPECIFIED	7	34	4.86
		A419 SEPSIS, UNSPECIFIED ORGANISM	6	32	5.33
		R112 NAUSEA WITH VOMITING, UNSPECIFIED	6	17	2.83
CHANGEPOINT PSYCHIATRIC	14	R45851 SUICIDAL IDEATIONS	9	62	6.89
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	4	12	3.00
		F10120 ALCOHOL ABUSE WITH INTOXICATION, UNCOMPLICATED	3	12	4.00
CITY OF HOPE CANCER CENTER	1	Z421 ENCOUNTER FOR BREAST RECONSTRUCTION FOLLOWING	1	1	1.00
CLEARSKY REHABILITATION	2	I69398 OTHER SEQUELAE OF CEREBRAL INFARCTION	1	18	18.00

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			Count	Days	ALOS
		Z4789 ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE	1	10	10.00
CLOVIS COMMUNITY MEDICAL	1	K148 OTHER DISEASES OF TONGUE	1	2	2.00
COBRE VALLEY COMM HOSPITAL	2	R112 NAUSEA WITH VOMITING, UNSPECIFIED	1	5	5.00
		R600 LOCALIZED EDEMA	1	4	4.00
		D649 ANEMIA, UNSPECIFIED	1	3	3.00
COMM EMERG PSYCHIATRIC	63	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	31	567	18.29
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	22	382	17.36
		F209 SCHIZOPHRENIA, UNSPECIFIED	14	319	22.79
COMMUNITY PARTNERS INTEGR	44	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	1,077	1,077	1.00
		F209 SCHIZOPHRENIA, UNSPECIFIED	243	243	1.00
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	163	163	1.00
COPPER SPRINGS	224	F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	154	1,222	7.94
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	57	483	8.47
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	56	447	7.98
COPPER SPRINGS EAST	244	F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	147	1,076	7.32
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	119	934	7.85
		F322 MAJOR DEPRESSV DISORD, SINGLE EPSD, SEV W/O PSYCH FEATURES	41	296	7.22
CORNERSTONE BEHAVIORAL	136	F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	56	496	8.86
		F1123 OPIOID DEPENDENCE WITH WITHDRAWAL	57	328	5.75
		F209 SCHIZOPHRENIA, UNSPECIFIED	46	411	8.93
CORNERSTONE SPECIALTY HOSPITAL	3	J9600 ACUTE RESPIRATORY FAILURE, UNSP W HYPOXIA OR HYPERCAPNIA	2	43	21.50
		J9620 ACUTE AND CHR RESP FAILURE, UNSP W HYPOXIA OR HYPERCAPNIA	1	21	21.00
CRISIS RESPONSE CENTER	70	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	28	208	7.43
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	25	226	9.04
		F209 SCHIZOPHRENIA, UNSPECIFIED	23	143	6.22
DECISION POINT DETOX	8	F10230 ALCOHOL DEPENDENCE WITH WITHDRAWAL, UNCOMPLICATED	6	23	3.83
		F1123 OPIOID DEPENDENCE WITH WITHDRAWAL	3	10	3.33
DEER VALLEY MEDICAL CTR.	20	A419 SEPSIS, UNSPECIFIED ORGANISM	14	93	6.64

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		E871 HYPO-OSMOLALITY AND HYPONATREMIA	5	21	4.20
		A4101 SEPSIS DUE TO METHICILLIN SUSCEPTIBLE STAPHYLOCOCCUS AUREUS	3	24	8.00
DESERT MOUNTAIN HEALTH LL	6	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	6	18	3.00
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	1	3	3.00
DESERT PRKWY BEH HLTH HSP	9	F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	5	22	4.40
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	3	12	4.00
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	2	14	7.00
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	2	14	7.00
DESTINY SPRINGS HEALTHCARE	78	F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	45	355	7.89
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	34	270	7.94
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	17	141	8.29
DIGNITY HEALTH EAST VALLEY	1	T796XXD TRAUMATIC ISCHEMIA OF MUSCLE, SUBSEQUENT ENCOUNTER	1	7	7.00
DIGNITY HLTH AZ GENERAL	10	J189 PNEUMONIA, UNSPECIFIED ORGANISM	5	13	2.60
		A419 SEPSIS, UNSPECIFIED ORGANISM	3	8	2.67
		J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	2	11	5.50
DIGNITY-KINDRED REHAB HOSPITAL	1	E512 WERNICKE'S ENCEPHALOPATHY	1	1	1.00
EAST VALLEY ADDICTION RECOVERY	63	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	33	257	7.79
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	20	140	7.00
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL CONDITION	17	168	9.88
ENCOMPASS HEALTH VALLEY	2	Z471 AFTERCARE FOLLOWING JOINT REPLACEMENT SURGERY	1	20	20.00
		R5381 OTHER MALAISE	1	8	8.00
ENCOMPASS REHAB EAST SHEA	4	M4854XD COLLAPSED VERT, NEC, THOR REGION, SUBS FOR FX W ROUTN HEALTH	1	18	18.00
		G928 OTHER TOXIC ENCEPHALOPATHY	1	14	14.00
		R531 WEAKNESS	1	9	9.00
		Z4789 ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE	1	9	9.00
ENCOMPASS REHAB EAST VALLEY	3	I69351 HEMIPLGA FOLLOWING CEREBRAL INFRC AFF RIGHT DOMINANT SIDE	1	17	17.00
		T3111 BURNS OF 10-19% OF BODY SURFACE W 10-19% THIRD DEGREE BURNS	1	8	8.00

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		S069X9D UNSP INTRACRANIAL INJURY W LOC OF UNSP DURATION, SUBS	1	7	7.00
ENCOMPASS REHAB NW TUCSON	1	Z44122 ENCOUNTER FOR FIT/ADJST OF PARTIAL ARTIFICIAL LEFT LEG	1	7	7.00
ENCOMPASS REHAB TUCSON	6	Z4789 ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE	3	31	10.33
		S066XAD TRAUMATIC SUBARACHNOID HEMORRHAGE WITH LOSS OF CONSCIOUSNESS STATUS UNKNOWN, SUB	2	24	12.00
		S24114D COMPLETE LESION AT T11-T12, SUBS	2	31	15.50
FLAGSTAFF MEDICAL CENTER	11	J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	5	14	2.80
		A419 SEPSIS, UNSPECIFIED ORGANISM	4	43	10.75
		E1010 TYPE 1 DIABETES MELLITUS WITH KETOACIDOSIS WITHOUT COMA	4	7	1.75
FORT DEFIANCE INDIAN HOSPITAL	3	L02811 CUTANEOUS ABSCESS OF HEAD [ANY PART, EXCEPT FACE]	1	5	5.00
		L03115 CELLULITIS OF RIGHT LOWER LIMB	1	4	4.00
		S81851D OPEN BITE, RIGHT LOWER LEG, SUBSEQUENT ENCOUNTER	1	3	3.00
GALLUP INDIAN MEDICAL CTR	1	F10239 ALCOHOL DEPENDENCE WITH WITHDRAWAL, UNSPECIFIED	1	2	2.00
HAVASU REGIONAL MEDICAL CENTER	7	R4182 ALTERED MENTAL STATUS, UNSPECIFIED	3	8	2.67
		R0602 SHORTNESS OF BREATH	2	11	5.50
		R112 NAUSEA WITH VOMITING, UNSPECIFIED	2	5	2.50
HAVEN BEHAVIORL HLTH OF AZ	2	F329 MAJOR DEPRESSIVE DISORDER, SINGLE EPISODE, UNSPECIFIED	2	15	7.50
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	1	10	10.00
HAVEN BHVIORL HOSP OF PHX	287	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	175	2,555	14.60
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	93	1,198	12.88
		F209 SCHIZOPHRENIA, UNSPECIFIED	57	751	13.18
HENDERSON HOSPITAL	2	R109 UNSPECIFIED ABDOMINAL PAIN	1	2	2.00
		R079 CHEST PAIN, UNSPECIFIED	1	1	1.00
HOLY CROSS HOSPITAL	2	J1000 FLU DUE TO OTH IDENT FLU VIRUS W UNSP TYPE OF PNEUMONIA	1	1	1.00
		O4292 FULL-TERM PREM ROM, UNSP TIME BETW RUPTURE AN	1	1	1.00
HONORHEALTH FLORENCE MEDICAL	2	K8590 ACUTE PANCREATITIS WITHOUT NECROSIS OR INFECTION, UNSPECIFIED	1	6	6.00
		N3090 CYSTITIS, UNSPECIFIED WITHOUT HEMATURIA	1	2	2.00
	4	E512 WERNICKE'S ENCEPHALOPATHY	1	8	8.00

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Table 1b – SFY 2025 Hospitalizations By Facility - 7/1/2024 To 12/31/24 ³					
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HONORHEALTH FOUR PEAKS MEDICAL		I214 NON-ST ELEVATION (NSTEMI) MYOCARDIAL INFARCTION	1	8	8.00
		K650 GENERALIZED (ACUTE) PERITONITIS	1	2	2.00
		K921 MELENA	1	4	4.00
HONORHEALTH REHAB HOSPITAL	2	I69398 OTHER SEQUELAE OF CEREBRAL INFARCTION	1	16	16.00
		M86172 OTHER ACUTE OSTEOMYELITIS, LEFT ANKLE AND FOOT	1	12	12.00
HONORHEALTH SCOTTSDALE OS	16	A419 SEPSIS, UNSPECIFIED ORGANISM	10	77	7.70
		E871 HYPO-OSMOLALITY AND HYPONATREMIA	4	28	7.00
		I2699 OTHER PULMONARY EMBOLISM WITHOUT ACUTE COR PULMONALE	4	17	4.25
HONORHEALTH SCOTTSDALE SHEA	6	E6601 MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	3	4	1.33
		T83511A INFECTION AND INFLAMMATORY REACTION DUE TO INDWELLING URETHRAL CATHETER, INITIAL	2	12	6.00
		I2699 OTHER PULMONARY EMBOLISM WITHOUT ACUTE COR PULMONALE	2	3	1.50
HONORHEALTH SCOTTSDALE TH	3	K7031 ALCOHOLIC CIRRHOSIS OF LIVER WITH ASCITES	1	24	24.00
		E1169 TYPE 2 DIABETES MELLITUS WITH OTHER SPECIFIED COMPLICATION	1	8	8.00
		J101 FLU DUE TO OTH IDENT INFLUENZA VIRUS W OTH RESP MANIFEST	1	8	8.00
HONORHEALTH SONORAN CROSS	4	E1169 TYPE 2 DIABETES MELLITUS WITH OTHER SPECIFIED COMPLICATION	1	4	4.00
		J869 PYOTHORAX WITHOUT FISTULA	1	4	4.00
		J189 PNEUMONIA, UNSPECIFIED ORGANISM	1	3	3.00
		K56609 UNSPECIFIED INTESTINAL OBSTRUCTION, UNSPECIFIED AS TO PARTIAL VERSUS COMPLETE OB	1	3	3.00
HONORHEALTH TEMPE MEDICAL	6	L03116 CELLULITIS OF LEFT LOWER LIMB	3	19	6.33
		R079 CHEST PAIN, UNSPECIFIED	2	6	3.00
		J189 PNEUMONIA, UNSPECIFIED ORGANISM	1	9	9.00
HOPI HEALTH CARE CENTER	2	K8590 ACUTE PANCREATITIS WITHOUT NECROSIS OR INFECTION, UNSPECIFIED	1	3	3.00
		N390 URINARY TRACT INFECTION, SITE NOT SPECIFIED	1	1	1.00
HU HU KAM MEMORIAL HOSPITAL	1	N12 TUBULO-INTERSTITIAL NEPHRITIS, NOT SPCF AS ACUTE OR CHRONIC	1	4	4.00
IHS CHINLE HOSPITAL	2	L97528 NON-PRESSURE CHRONIC ULCER OF OTHER PART OF LEFT FOOT WITH OTHER SPECIFIED SEVER	1	11	11.00

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		R4182 ALTERED MENTAL STATUS, UNSPECIFIED	1	2	2.00
IHS PHOENIX INDIAN MED CT	3	B384 COCCIDIOIDOMYCOSIS MENINGITIS	1	12	12.00
		L03211 CELLULITIS OF FACE	1	7	7.00
		R6889 OTHER GENERAL SYMPTOMS AND SIGNS	1	6	6.00
INTERMOUNTAIN HEALTH ST.	5	T85738A INFECTION AND INFLAMMATORY REACTION DUE TO OTHER NERVOUS SYSTEM DEVICE, IMPLANT	1	8	8.00
		J8410 PULMONARY FIBROSIS, UNSPECIFIED	1	7	7.00
		I214 NON-ST ELEVATION (NSTEMI) MYOCARDIAL INFARCTION	1	3	3.00
		R300 DYSURIA	1	3	3.00
		R45851 SUICIDAL IDEATIONS	1	3	3.00
JOHN C LINCOLN MEDICAL CT	25	A419 SEPSIS, UNSPECIFIED ORGANISM	14	78	5.57
		J441 CHRONIC OBSTRUCTIVE PULMONARY DISEASE W (ACUTE) EXACERBATION	7	24	3.43
		N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	5	15	3.00
KINGMAN REGIONAL MEDICAL	16	J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	9	31	3.44
		E1110 TYPE 2 DIABETES MELLITUS WITH KETOACIDOSIS WITHOUT COMA	6	31	5.17
		A419 SEPSIS, UNSPECIFIED ORGANISM	4	38	9.50
LA FRONTERA CENTER INC.	48	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	316	1,914	6.06
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	5	31	6.20
		F209 SCHIZOPHRENIA, UNSPECIFIED	6	39	6.50
LDS HOSPITAL	1	F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	1	13	13.00
LEGACY EMANUEL HOSPITAL	2	F309 MANIC EPISODE, UNSPECIFIED	1	5	5.00
		F310 BIPOLAR DISORDER, CURRENT EPISODE HYPOMANIC	1	5	5.00
LEGACY MT HOOD MED CTR	1	F1123 OPIOID DEPENDENCE WITH WITHDRAWAL	1	2	2.00
LITTLE COLORADO MED CENTER	2	K5720 DVTRCLI OF LG INT W PERFORATION AND ABSCESS W/O BLEEDING	1	9	9.00
		K5732 DVTRCLI OF LG INT W/O PERFORATION OR ABSCESS W/O BLEEDING	1	4	4.00
		R1084 GENERALIZED ABDOMINAL PAIN	1	4	4.00
MARICOPA COMMUNITY HOSPITAL	2	R0602 SHORTNESS OF BREATH	1	2	2.00
		Z4800 ENCOUNTER FOR CHANGE OR REMOVAL OF NONSURG WOUND DRESSING	1	1	1.00

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MARY LANNING HEALTHCARE	1	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	1	6	6.00
MAYO CLINIC HOSPITAL	3	J189 PNEUMONIA, UNSPECIFIED ORGANISM	2	6	3.00
		E8351 HYPOCALCEMIA	2	4	2.00
		R509 FEVER, UNSPECIFIED	1	16	16.00
MEMORIAL HERMANN HOSPITAL SW	1	R45851 SUICIDAL IDEATIONS	1	3	3.00
MERCY GILBERT MEDICAL CENTER	9	R0602 SHORTNESS OF BREATH	4	31	7.75
		R109 UNSPECIFIED ABDOMINAL PAIN	3	12	4.00
		A419 SEPSIS, UNSPECIFIED ORGANISM	3	9	3.00
MERCY HEALTH - ST VINCENT	1	I4891 UNSPECIFIED ATRIAL FIBRILLATION	1	3	3.00
MERCYONE SIOUXLAND MEDICAL	1	R079 CHEST PAIN, UNSPECIFIED	1	3	3.00
MOGOLLON TREATMENT CENTER	25	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	22	144	6.55
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	5	27	5.40
		F1520 OTHER STIMULANT DEPENDENCE, UNCOMPLICATED	4	24	6.00
MOHAVE MENTAL HEALTH CLIN	33	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	26	224	8.62
		F209 SCHIZOPHRENIA, UNSPECIFIED	11	74	6.73
		F331 MAJOR DEPRESSIVE DISORDER, RECURRENT, MODERATE	8	43	5.38
MOUNTAIN VALLEY REG REHAB	3	Z4789 ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE	1	31	31.00
		S32011D STABLE BURST FX FIRST LUM VERTEBRA, SUBS FOR FX W ROUTN HEAL	1	19	19.00
		S72011D UNSP INTRACAP FX RIGHT FEMUR, SUBS FOR CLOS FX W ROUTN HEAL	1	32	32.00
MOUNTAIN VISTA MED CENTER	4	F39 UNSPECIFIED MOOD [AFFECTIVE] DISORDER	2	34	17.00
		I509 HEART FAILURE, UNSPECIFIED	1	21	21.00
		J9691 RESPIRATORY FAILURE, UNSPECIFIED WITH HYPOXIA	1	19	19.00
MT. GRAHAM REG. MED. CTR.	2	R0602 SHORTNESS OF BREATH	1	12	12.00
		R109 UNSPECIFIED ABDOMINAL PAIN	1	9	9.00
		R112 NAUSEA WITH VOMITING, UNSPECIFIED	1	5	5.00
NORTHERN NAVAJO MEDICAL C	1	A419 SEPSIS, UNSPECIFIED ORGANISM	1	1	1.00

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NORTHRIDGE HOSPITAL MEDICAL	1	R0602 SHORTNESS OF BREATH	1	4	4.00
NORTHWEST MEDICAL CENTER	3	I509 HEART FAILURE, UNSPECIFIED	1	7	7.00
		N202 CALCULUS OF KIDNEY WITH CALCULUS OF URETER	1	7	7.00
		U071 2019-NCOV ACUTE RESPIRATORY DISEASE	1	5	5.00
NORTHWEST MEDICAL CENTER	4	J441 CHRONIC OBSTRUCTIVE PULMONARY DISEASE W (ACUTE) EXACERBATION	2	4	2.00
		I480 PAROXYSMAL ATRIAL FIBRILLATION	1	5	5.00
		N3090 CYSTITIS, UNSPECIFIED WITHOUT HEMATURIA	1	5	5.00
NORTHWEST MEDICAL CENTER	17	A419 SEPSIS, UNSPECIFIED ORGANISM	14	103	7.36
		N390 URINARY TRACT INFECTION, SITE NOT SPECIFIED	3	6	2.00
		K56609 UNSPECIFIED INTESTINAL OBSTRUCTION, UNSPECIFIED AS TO PARTIAL VERSUS COMPLETE OB	2	23	11.50
NORTHWESTERN MEMORIAL HOSPITAL	1	J45901 UNSPECIFIED ASTHMA WITH (ACUTE) EXACERBATION	1	2	2.00
OASIS BEHAVIORAL HEALTH HOSPITAL	165	F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	85	733	8.62
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	72	517	7.18
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	33	258	7.82
ORO VALLEY HOSPITAL	4	K8590 ACUTE PANCREATITIS WITHOUT NECROSIS OR INFECTION, UNSPECIFIED	1	11	11.00
		L03115 CELLULITIS OF RIGHT LOWER LIMB	1	5	5.00
		E8770 FLUID OVERLOAD, UNSPECIFIED	1	4	4.00
		J690 PNEUMONITIS DUE TO INHALATION OF FOOD AND VOMIT	1	4	4.00
ORO VALLEY HOSPITAL PSYCH	43	R45851 SUICIDAL IDEATIONS	32	193	6.03
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	9	66	7.33
		F411 GENERALIZED ANXIETY DISORDER	6	24	4.00
OWENSBORO HEALTH REGIONAL	1	K8031 CALCULUS OF BILE DUCT W CHOLANGITIS, UNSP, WITH OBSTRUCTION	1	8	8.00
PAGE HOSPITAL	2	R000 TACHYCARDIA, UNSPECIFIED	1	14	14.00
		L03116 CELLULITIS OF LEFT LOWER LIMB	1	12	12.00
		R0602 SHORTNESS OF BREATH	1	2	2.00

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PALO VERDE BEHAVIORAL HLT	138	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	83	1,003	12.08
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	55	631	11.47
		F209 SCHIZOPHRENIA, UNSPECIFIED	26	325	12.50
PAM HEALTH REHABILITATION	1	G834 CAUDA EQUINA SYNDROME	1	24	24.00
PHOENIX CHILDRENS HOSPITAL	1	M21762 UNEQUAL LIMB LENGTH (ACQUIRED), LEFT TIBIA	1	1	1.00
PHOENIX MEDICAL PSYCHIATRY	198	F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	99	1,067	10.78
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	63	687	10.90
		F209 SCHIZOPHRENIA, UNSPECIFIED	62	796	12.84
PHOENIX SPECIALTY HOSPITAL	1	J9621 ACUTE AND CHRONIC RESPIRATORY FAILURE WITH HYPOXIA	1	7	7.00
PINNACLE PEAK RECOVERY	1	F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	7	7	1.00
PRESBYTERIAN HOSPITAL	1	A4189 OTHER SPECIFIED SEPSIS	1	11	11.00
PRONGHORN PSYCHIATRY	20	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	11	145	13.18
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	9	117	13.00
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	6	80	13.33
PURPOSE HEALING CENTER	43	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	130	132	1.02
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	63	75	1.19
		F1010 ALCOHOL ABUSE, UNCOMPLICATED	5	5	1.00
QUAIL RUN BEHAVIORAL HEALTH	123	F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	75	625	8.33
		F331 MAJOR DEPRESSIVE DISORDER, RECURRENT, MODERATE	33	217	6.58
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	31	247	7.97
RECOVERY INNOVATIONS INC	50	F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	22	83	3.77
		F39 UNSPECIFIED MOOD [AFFECTIVE] DISORDER	16	78	4.88
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	14	70	5.00
REHABILITATION HOSPITAL	2	I69354 HEMIPLGA FOLLOWING CEREBRAL INFRC AFFECTING LEFT NONDOM SIDE	1	19	19.00
		S066XAD TRAUMATIC SUBARACHNOID HEMORRHAGE WITH LOSS OF CONSCIOUSNESS STATUS UNKNOWN, SUB	1	9	9.00
REUNION REHABILITATION HOSPITAL	3	S065XAD TRAUMATIC SUBDURAL HEMORRHAGE WITH LOSS OF CONSCIOUSNESS STATUS UNKNOWN, SUBSEQU	1	17	17.00
		S43005D UNSPECIFIED DISLOCATION OF LEFT SHOULDER JOINT, SUBS ENCNR	1	16	16.00

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		Z4789 ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE	1	14	14.00
REUNION REHABILITATION	1	G919 HYDROCEPHALUS, UNSPECIFIED	1	9	9.00
RI INTERNATIONAL	43	F39 UNSPECIFIED MOOD [AFFECTIVE] DISORDER	19	96	5.05
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	16	77	4.81
		F319 BIPOLAR DISORDER, UNSPECIFIED	10	68	6.80
ROSEWOOD RANCH	4	F50022 ANOREXIA NERVOSA, BINGE EATING/PURGING TYPE, SEVERE	8	43	5.38
		F5023 BULIMIA NERVOSA, SEVERE	5	30	6.00
		F50012 ANOREXIA NERVOSA, RESTRICTING TYPE, SEVERE	3	12	4.00
ROYAL LIFE CENTERS	8	F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	7	36	5.14
		F1120 OPIOID DEPENDENCE, UNCOMPLICATED	1	5	5.00
SAGE MEMORIAL HOSPITAL	1	G40401 OTH GENERALIZED EPILEPSY, NOT INTRACTABLE, W STAT EPI	1	1	1.00
SAN CARLOS APACHE HEALTHCARE	2	N10 ACUTE PYELONEPHRITIS	1	2	2.00
		J020 STREPTOCOCCAL PHARYNGITIS	1	1	1.00
SAN JUAN REG MED CTR-NM	2	E1169 TYPE 2 DIABETES MELLITUS WITH OTHER SPECIFIED COMPLICATION	1	5	5.00
		N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	1	1	1.00
SBH CRU 1	63	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	106	547	5.16
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	61	311	5.10
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	56	297	5.30
SBH CRU 2	64	F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	64	313	4.89
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	53	242	4.57
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	36	171	4.75
SBH KRU	42	F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	22	90	4.09
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	19	79	4.16
		F251 SCHIZOAFFECTIVE DISORDER, DEPRESSIVE TYPE	7	13	1.86
SBH RTP	42	F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	96	594	6.19
		F209 SCHIZOPHRENIA, UNSPECIFIED	79	484	6.13
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	58	355	6.12
SELECT SPECIALTY HOSPITAL	5	J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	3	74	24.67

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Table 1b – SFY 2025 Hospitalizations By Facility - 7/1/2024 To 12/31/24 ³					
Facility Name	Total Distinct Member Count	Top 3 Primary Admitting Diagnosis	Hospitalizations		
			Count	Days	ALOS
		J9600 ACUTE RESPIRATORY FAILURE, UNSP W HYPOXIA OR HYPERCAPNIA	1	80	80.00
		J9690 RESPIRATORY FAILURE, UNSP, UNSP W HYPOXIA OR HYPERCAPNIA	1	68	68.00
SELECT SPECIALTY HOSP-PHX	1	J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	1	17	17.00
SELECT SPECIALTY-PHX D T	3	J9621 ACUTE AND CHRONIC RESPIRATORY FAILURE WITH HYPOXIA	2	50	25.00
		J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	2	36	18.00
SEVEN HILLS HOSPITAL	1	F319 BIPOLAR DISORDER, UNSPECIFIED	1	9	9.00
SONORA BEHAVIORAL HEALTH	258	F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	221	2,686	12.15
		F339 MAJOR DEPRESSIVE DISORDER, RECURRENT, UNSPECIFIED	67	712	10.63
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	49	498	10.16
SOUTHERN HILLS HOSPITAL	3	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	1	10	10.00
		A419 SEPSIS, UNSPECIFIED ORGANISM	1	8	8.00
		N390 URINARY TRACT INFECTION, SITE NOT SPECIFIED	1	5	5.00
SPRING MOUNTAIN TREATMENT	2	F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	1	12	12.00
		F315 BIPOLAR DISORD, CRNT EPSD DEPRESS, SEVERE, W PSYCH FEATURES	1	4	4.00
ST JOSEPHS HOSPITAL	55	A419 SEPSIS, UNSPECIFIED ORGANISM	38	197	5.18
		N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	18	49	2.72
		T6701XA HEATSTROKE AND SUNSTROKE, INITIAL ENCOUNTER	5	30	6.00
ST JOSEPHS HOSP-TUCSON	15	A419 SEPSIS, UNSPECIFIED ORGANISM	8	56	7.00
		R109 UNSPECIFIED ABDOMINAL PAIN	4	21	5.25
		N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	4	15	3.75
ST JOSEPHS WESTGATE MEDICAL	6	J45901 UNSPECIFIED ASTHMA WITH (ACUTE) EXACERBATION	2	4	2.00
		A419 SEPSIS, UNSPECIFIED ORGANISM	2	3	1.50
		R112 NAUSEA WITH VOMITING, UNSPECIFIED	2	3	1.50
ST LUKES BEHAVIORIAL HOSPITAL	95	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	87	882	10.14
		F312 BIPOLAR DISORD, CRNT EPISODE MANIC SEVERE W PSYCH FEATURES	6	44	7.33
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	5	60	12.00
ST MARYS HOSPITAL	25	A419 SEPSIS, UNSPECIFIED ORGANISM	12	89	7.42
		R45851 SUICIDAL IDEATIONS	7	48	6.86

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Table 1b – SFY 2025 Hospitalizations By Facility - 7/1/2024 To 12/31/24 ³					
Facility Name	Total Distinct Member Count	Top 3 Primary Admitting Diagnosis	Hospitalizations		
			Count	Days	ALOS
		J189 PNEUMONIA, UNSPECIFIED ORGANISM	7	29	4.14
ST. AGNES MEDICAL CENTER	1	O9A213 INJ/POISN/OTH CONSEQ OF EXTERNAL CAUSES COMP	1	2	2.00
ST. LUKES HOSPITAL OF DULU	1	K625 HEMORRHAGE OF ANUS AND RECTUM	1	3	3.00
		R109 UNSPECIFIED ABDOMINAL PAIN	1	3	3.00
SUMMIT HEALTHCARE REG.MED	12	R0602 SHORTNESS OF BREATH	11	36	3.27
		R109 UNSPECIFIED ABDOMINAL PAIN	7	45	6.43
		R079 CHEST PAIN, UNSPECIFIED	2	5	2.50
SUNRISE HOSPITAL AND MEDICAL	5	A419 SEPSIS, UNSPECIFIED ORGANISM	2	11	5.50
		I110 HYPERTENSIVE HEART DISEASE WITH HEART FAILURE	2	11	5.50
		L03115 CELLULITIS OF RIGHT LOWER LIMB	1	22	22.00
SWEETWATER HOSPITAL ASSOC	1	J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	1	2	2.00
TEMPE ST LUKES HOSPITAL	8	A419 SEPSIS, UNSPECIFIED ORGANISM	4	20	5.00
		N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	3	6	2.00
		J45901 UNSPECIFIED ASTHMA WITH (ACUTE) EXACERBATION	3	4	1.33
THE CORE INSTITUTE SPECIAL	2	M4807 SPINAL STENOSIS, LUMBOSACRAL REGION	1	1	1.00
		T84092A MECH COMPL OF INTERNAL RIGHT KNEE PROSTHESIS, INIT ENCNR	1	1	1.00
THE GUIDANCE CTR- VICKE	18	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	13	169	13.00
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	8	39	4.88
		F209 SCHIZOPHRENIA, UNSPECIFIED	7	99	14.14
THE RIVER SOURCE TREATMENT CENTER	13	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	12	54	4.50
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	3	18	6.00
TOOLE INPATIENT	37	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	21	187	8.90
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	14	68	4.86
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	12	67	5.58
TUBA CITY REGIONAL HEALTH	3	F10139 ALCOHOL ABUSE WITH WITHDRAWAL, UNSPECIFIED	3	8	2.67
		F10129 ALCOHOL ABUSE WITH INTOXICATION, UNSPECIFIED	2	7	3.50
		A419 SEPSIS, UNSPECIFIED ORGANISM	1	4	4.00

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Table 1b – SFY 2025 Hospitalizations By Facility - 7/1/2024 To 12/31/24 ³					
Facility Name	Total Distinct Member Count	Top 3 Primary Admitting Diagnosis	Hospitalizations		
			Count	Days	ALOS
TUCSON MEDICAL CENTER	35	R0602 SHORTNESS OF BREATH	15	72	4.80
		A419 SEPSIS, UNSPECIFIED ORGANISM	12	72	6.00
		R079 CHEST PAIN, UNSPECIFIED	9	46	5.11
TUCSON MEDICAL CENTER	4	J189 PNEUMONIA, UNSPECIFIED ORGANISM	2	8	4.00
		C786 SECONDARY MALIGNANT NEOPLASM OF RETROPERITON AND PERITONEUM	1	6	6.00
		M793 PANNICULITIS, UNSPECIFIED	1	4	4.00
UCSD MEDICAL CENTER	1	I5023 ACUTE ON CHRONIC SYSTOLIC (CONGESTIVE) HEART FAILURE	1	4	4.00
UNHOOKED RECOVERY POWER	25	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	68	68	1.00
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	50	50	1.00
		F1520 OTHER STIMULANT DEPENDENCE, UNCOMPLICATED	14	14	1.00
UNIVERSITY MEDICAL CTR-NV	1	R519 HEADACHE, UNSPECIFIED	1	3	3.00
UNIVERSITY OF COLORADO HO	1	F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	1	16	16.00
UPC INPATIENT	107	F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	42	604	14.38
		F209 SCHIZOPHRENIA, UNSPECIFIED	41	640	15.61
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	28	397	14.18
URGENT PSYCHIATRIC CENTER	96	F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	46	514	11.17
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	34	444	13.06
		F319 BIPOLAR DISORDER, UNSPECIFIED	19	122	6.42
URGENT PSYCHIATRIC CENTER	81	F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	37	336	9.08
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	35	494	14.11
		F319 BIPOLAR DISORDER, UNSPECIFIED	20	236	11.80
VALLEY HOSPITAL	158	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	99	962	9.72
		F1123 OPIOID DEPENDENCE WITH WITHDRAWAL	51	405	7.94
		F251 SCHIZOAFFECTIVE DISORDER, DEPRESSIVE TYPE	47	451	9.60
VALLEY HOSPITAL-NV	1	L02511 CUTANEOUS ABSCESS OF RIGHT HAND	1	4	4.00
VALLEY VIEW MEDICAL CENTER	3	A419 SEPSIS, UNSPECIFIED ORGANISM	1	2	2.00
		J189 PNEUMONIA, UNSPECIFIED ORGANISM	1	2	2.00
		I429 CARDIOMYOPATHY, UNSPECIFIED	1	1	1.00

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Table 1b – SFY 2025 Hospitalizations By Facility - 7/1/2024 To 12/31/24 ³					
Facility Name	Total Distinct Member Count	Top 3 Primary Admitting Diagnosis	Hospitalizations		
			Count	Days	ALOS
VALLEYWISE HEALTH MEDICAL	829	F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	466	7,232	15.52
		F209 SCHIZOPHRENIA, UNSPECIFIED	301	6,329	21.03
		F319 BIPOLAR DISORDER, UNSPECIFIED	205	2,941	14.35
VERDE VALLEY MEDICAL CENTER	6	K8590 ACUTE PANCREATITIS WITHOUT NECROSIS OR INFECTION, UNSPECIFIED	3	7	2.33
		R0602 SHORTNESS OF BREATH	2	9	4.50
		A419 SEPSIS, UNSPECIFIED ORGANISM	2	8	4.00
VIA LINDA BEHAVIORAL HOSPITAL	196	F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	144	1,198	8.32
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	70	628	8.97
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	18	144	8.00
VIRTUE DETOX LLC	17	F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	17	105	6.18
		F1120 OPIOID DEPENDENCE, UNCOMPLICATED	3	10	3.33
VIRTUE RECOVERY CENTER	26	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	23	100	4.35
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	12	55	4.58
VOGUE RECOVERY CENTER	71	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	58	266	4.59
		F1520 OTHER STIMULANT DEPENDENCE, UNCOMPLICATED	21	101	4.81
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	9	39	4.33
WEST VALLEY INPATIENT	66	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	38	619	16.29
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	21	330	15.71
		F209 SCHIZOPHRENIA, UNSPECIFIED	21	337	16.05
WEST YAVAPAI GUIDANCE CLI	15	F32A DEPRESSION, UNSPECIFIED	6	34	5.67
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	6	35	5.83
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	4	17	4.25
WESTERN ARIZONA REGIONAL	7	N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	3	5	1.67
		A419 SEPSIS, UNSPECIFIED ORGANISM	2	35	17.50
		R4182 ALTERED MENTAL STATUS, UNSPECIFIED	2	7	3.50
WHITERIVER INDIAN HOSPITAL	3	N12 TUBULO-INTERSTITIAL NEPHRITIS, NOT SPCF AS ACUTE OR CHRONIC	2	3	1.50
		F10239 ALCOHOL DEPENDENCE WITH WITHDRAWAL, UNSPECIFIED	1	3	3.00
		K8590 ACUTE PANCREATITIS WITHOUT NECROSIS OR INFECTION, UNSPECIFIED	1	3	3.00

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Table 1b – SFY 2025 Hospitalizations By Facility - 7/1/2024 To 12/31/24 ³					
Facility Name	Total Distinct Member Count	Top 3 Primary Admitting Diagnosis	Hospitalizations		
			Count	Days	ALOS
WINDHAVEN PSYCHIATRIC HOSPITAL	30	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	12	161	13.42
		F209 SCHIZOPHRENIA, UNSPECIFIED	12	136	11.33
		F32A DEPRESSION, UNSPECIFIED	12	94	7.83
YAVAPAI REG MED CENTER	10	A419 SEPSIS, UNSPECIFIED ORGANISM	5	21	4.20
		K7682 HEPATIC ENCEPHALOPATHY	3	26	8.67
		U071 2019-NCOV ACUTE RESPIRATORY DISEASE	3	11	3.67
YUMA INPATIENT AND CRISIS	46	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	35	306	8.74
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	24	252	10.50
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	14	103	7.36
YUMA REGIONAL MED CENTER	11	F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	5	39	7.80
		R0602 SHORTNESS OF BREATH	3	15	5.00
		L0390 CELLULITIS, UNSPECIFIED	3	11	3.67

Hospitalizations By Facility

Table 1b – SFY 2025 Hospitalizations By Facility - 1/1/2025 To 6/30/25 ³					
Facility Name	Total Distinct Member Count	Top 3 Primary Admitting Diagnosis	Hospitalizations		
			Count	Days	ALOS
ABRAZO ARROWHEAD CAMPUS	12	A419 SEPSIS, UNSPECIFIED ORGANISM	6	44	7.33
		I214 NON-ST ELEVATION (NSTEMI) MYOCARDIAL INFARCTION	3	12	4.00
		E6601 MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	3	8	2.67
ABRAZO AZ HEART HOSPITAL	7	R079 CHEST PAIN, UNSPECIFIED	3	4	1.33
		J189 PNEUMONIA, UNSPECIFIED ORGANISM	2	8	4.00
		I110 HYPERTENSIVE HEART DISEASE WITH HEART FAILURE	2	4	2.00
ABRAZO CENTRAL CAMPUS	28	A419 SEPSIS, UNSPECIFIED ORGANISM	20	107	5.35
		J189 PNEUMONIA, UNSPECIFIED ORGANISM	5	21	4.20
		E871 HYPO-OSMOLALITY AND HYPONATREMIA	4	13	3.25

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Table 1b – SFY 2025 Hospitalizations By Facility - 1/1/2025 To 6/30/25³					
Facility Name	Total Distinct Member Count	Top 3 Primary Admitting Diagnosis	Hospitalizations		
			Count	Days	ALOS
ABRAZO SCOTTSDALE CAMPUS	12	E6601 MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	5	11	2.20
		A419 SEPSIS, UNSPECIFIED ORGANISM	5	26	5.20
		F10239 ALCOHOL DEPENDENCE WITH WITHDRAWAL, UNSPECIFIED	3	12	4.00
ABRAZO WEST CAMPUS	13	A419 SEPSIS, UNSPECIFIED ORGANISM	6	19	3.17
		S065XAA TRAUMATIC SUBDURAL HEMORRHAGE WITH LOSS OF CONSCIOUSNESS STATUS UNKNOWN, INITIAL	5	20	4.00
		J189 PNEUMONIA, UNSPECIFIED ORGANISM	4	16	4.00
AGAVE RIDGE BEHAVIORAL HOSPITAL	64	F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	31	241	7.77
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	24	190	7.92
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	19	224	11.79
ARIZONA BRIDGE TO RECOVERY	4	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	2	55	27.50
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	1	54	54.00
		F209 SCHIZOPHRENIA, UNSPECIFIED	1	32	32.00
ARIZONA GENERAL HOSPITAL	9	J189 PNEUMONIA, UNSPECIFIED ORGANISM	6	14	2.33
		J45901 UNSPECIFIED ASTHMA WITH (ACUTE) EXACERBATION	2	2	1.00
		J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	1	5	5.00
ARIZONA REHAB CAMPUS, LLC	2	F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	1	5	5.00
		F1123 OPIOID DEPENDENCE WITH WITHDRAWAL	1	3	3.00
ARIZONA SPECIALTY HOSPITAL	2	M4802 SPINAL STENOSIS, CERVICAL REGION	1	3	3.00
		Q6689 OTHER SPECIFIED CONGENITAL DEFORMITIES OF FEE	1	1	1.00
AURORA BEHAVIORAL HEALTH	300	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	195	1,923	9.86
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	87	729	8.38
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	77	634	8.23
AURORA BEHAVIORAL HEALTHCARE	190	F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	80	770	9.63
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	70	602	8.60
		F209 SCHIZOPHRENIA, UNSPECIFIED	76	1,013	13.33
AVENIR BEHAVIORAL HOSPITAL	115	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	100	834	8.34
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	15	119	7.93
		F314 BIPOLAR DISORD, CRNT EPSD DEPRESS, SEV, W/O PSYCH FEATURES	14	106	7.57
AVERA MCKENNAN HOSPITAL	1	F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	1	6	6.00
AXIOM CARE	34	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	19	60	3.16

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Table 1b – SFY 2025 Hospitalizations By Facility - 1/1/2025 To 6/30/25 ³					
Facility Name	Total Distinct Member Count	Top 3 Primary Admitting Diagnosis	Hospitalizations		
			Count	Days	ALOS
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	16	56	3.50
		F1121 OPIOID DEPENDENCE, IN REMISSION	1	4	4.00
BANNER - UNIVERSITY MEDICAL	82	A419 SEPSIS, UNSPECIFIED ORGANISM	48	421	8.77
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	19	247	13.00
		R45851 SUICIDAL IDEATIONS	18	182	10.11
BANNER - UNIVERSITY MEDICAL	84	F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	40	351	8.78
		A419 SEPSIS, UNSPECIFIED ORGANISM	27	167	6.19
		F209 SCHIZOPHRENIA, UNSPECIFIED	19	283	14.89
BANNER BAYWOOD MEDICAL CE	18	A419 SEPSIS, UNSPECIFIED ORGANISM	13	108	8.31
		R0602 SHORTNESS OF BREATH	5	40	8.00
		I130 HYP HRT & CHR KDNY DIS W HRT FAIL AND STG 1-4/UNSP CHR KDNY	3	18	6.00
BANNER BEHAVIORIAL HEALTH	133	F319 BIPOLAR DISORDER, UNSPECIFIED	65	430	6.62
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	43	297	6.91
		F32A DEPRESSION, UNSPECIFIED	41	251	6.12
BANNER BOSWELL MED CTR	23	A419 SEPSIS, UNSPECIFIED ORGANISM	13	134	10.31
		R0602 SHORTNESS OF BREATH	8	44	5.50
		N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	7	43	6.14
BANNER CASA GRANDE MEDICAL	10	E1010 TYPE 1 DIABETES MELLITUS WITH KETOACIDOSIS WITHOUT COMA	13	30	2.31
		A419 SEPSIS, UNSPECIFIED ORGANISM	6	27	4.50
		R109 UNSPECIFIED ABDOMINAL PAIN	4	14	3.50
BANNER DEL E WEBB MEDICAL CENTER	61	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	26	324	12.46
		R45851 SUICIDAL IDEATIONS	24	371	15.46
		F319 BIPOLAR DISORDER, UNSPECIFIED	17	131	7.71
BANNER DESERT MEDICAL CENTER	59	A419 SEPSIS, UNSPECIFIED ORGANISM	32	231	7.22
		N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	13	49	3.77
		E871 HYPO-OSMOLALITY AND HYPONATREMIA	10	43	4.30
		J189 PNEUMONIA, UNSPECIFIED ORGANISM	10	43	4.30
BANNER ESTRELLA MEDICAL	25	A419 SEPSIS, UNSPECIFIED ORGANISM	17	114	6.71
		R4182 ALTERED MENTAL STATUS, UNSPECIFIED	5	23	4.60
		J441 CHRONIC OBSTRUCTIVE PULMONARY DISEASE W (ACUTE) EXACERBATION	5	27	5.40
	10	A419 SEPSIS, UNSPECIFIED ORGANISM	4	30	7.50

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Table 1b – SFY 2025 Hospitalizations By Facility - 1/1/2025 To 6/30/25 ³					
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			Count	Days	ALOS
BANNER GATEWAY MEDICAL CT		K922 GASTROINTESTINAL HEMORRHAGE, UNSPECIFIED	3	13	4.33
		G928 OTHER TOXIC ENCEPHALOPATHY	2	19	9.50
		N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	2	19	9.50
BANNER GOLDFIELD MEDICAL CENTER	5	K8590 ACUTE PANCREATITIS WITHOUT NECROSIS OR INFECTION, UNSPECIFIED	1	2	2.00
		A419 SEPSIS, UNSPECIFIED ORGANISM	1	1	1.00
		J101 FLU DUE TO OTH IDENT INFLUENZA VIRUS W OTH RESP MANIFEST	1	1	1.00
		J441 CHRONIC OBSTRUCTIVE PULMONARY DISEASE W (ACUTE) EXACERBATION	1	1	1.00
		R509 FEVER, UNSPECIFIED	1	1	1.00
BANNER HEART HOSPITAL	11	I2510 ATHSCL HEART DISEASE OF NATIVE CORONARY ARTERY W/O ANG PCTRS	4	13	3.25
		I214 NON-ST ELEVATION (NSTEMI) MYOCARDIAL INFARCTION	3	9	3.00
		I213 ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF UNSP SITE	2	6	3.00
		I480 PAROXYSMAL ATRIAL FIBRILLATION	2	6	3.00
BANNER IRONWOOD MEDICAL	6	A419 SEPSIS, UNSPECIFIED ORGANISM	3	14	4.67
		J690 PNEUMONITIS DUE TO INHALATION OF FOOD AND VOMIT	2	33	16.50
		E10649 TYPE 1 DIABETES MELLITUS WITH HYPOGLYCEMIA WITHOUT COMA	2	7	3.50
BANNER OCOTILLO MEDICAL CENTER	6	E871 HYPO-OSMOLALITY AND HYPONATREMIA	2	9	4.50
		U071 2019-NCOV ACUTE RESPIRATORY DISEASE	2	8	4.00
		K8520 ALCOHOL INDUCED ACUTE PANCREATITIS WITHOUT NECROSIS OR INFECTION	2	5	2.50
BANNER PAYSON MEDICAL CENTER	5	R509 FEVER, UNSPECIFIED	1	6	6.00
		R0600 DYSPNEA, UNSPECIFIED	1	4	4.00
		I4819 OTHER PERSISTENT ATRIAL FIBRILLATION	1	3	3.00
		J440 CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITH (ACUTE) LOWER RESPIRATORY INFECTION	1	3	3.00
		S72142A DISPLACED INTERTROCHANTERIC FRACTURE OF LEFT FEMUR, INIT	1	3	3.00
BANNER REHABILITATION HOSPITAL	3	G7281 CRITICAL ILLNESS MYOPATHY	1	19	19.00
		I69151 HEMIPLEGIA FOL NTRM INTCRBL HEMOR AFF RIGHT DOMINANT SIDE	1	14	14.00
		J851 ABSCESS OF LUNG WITH PNEUMONIA	1	14	14.00
BANNER THUNDERBIRD MEDICAL	67	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	26	310	11.92
		A419 SEPSIS, UNSPECIFIED ORGANISM	24	263	10.96
		R45851 SUICIDAL IDEATIONS	23	185	8.04

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Facility Name	Total Distinct Member Count	Top 3 Primary Admitting Diagnosis	Hospitalizations		
			Count	Days	ALOS
BANNER UNIVERSITY MEDICAL	39	A419 SEPSIS, UNSPECIFIED ORGANISM	25	231	9.24
		R4182 ALTERED MENTAL STATUS, UNSPECIFIED	9	56	6.22
		R0602 SHORTNESS OF BREATH	7	52	7.43
BARSTOW COMMUNITY HOSPITAL-CA	1	I110 HYPERTENSIVE HEART DISEASE WITH HEART FAILURE	1	4	4.00
BENSON HOSPITAL	2	M6281 MUSCLE WEAKNESS (GENERALIZED)	1	6	6.00
		J1000 FLU DUE TO OTH IDENT FLU VIRUS W UNSP TYPE OF PNEUMONIA	1	2	2.00
		J441 CHRONIC OBSTRUCTIVE PULMONARY DISEASE W (ACUTE) EXACERBATION	1	2	2.00
BHC MESILLA VALLEY HOSPITAL	2	F209 SCHIZOPHRENIA, UNSPECIFIED	1	27	27.00
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	1	4	4.00
BUENA VISTA	63	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	55	241	4.38
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	22	111	5.05
		F1110 OPIOID ABUSE, UNCOMPLICATED	3	16	5.33
BUENA VISTA RECOVERY	4	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	4	16	4.00
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	1	6	6.00
BUENA VISTA RECOVERY	16	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	16	62	3.88
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	2	9	4.50
		F10229 ALCOHOL DEPENDENCE WITH INTOXICATION, UNSPECIFIED	1	7	7.00
CALVARY HEALING CENTER	19	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	14	57	4.07
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	4	15	3.75
		F1320 SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE, UNCOMPLICATED	1	1	1.00
CANYON VISTA MEDICAL CENTER	13	R45851 SUICIDAL IDEATIONS	8	37	4.63
		A419 SEPSIS, UNSPECIFIED ORGANISM	5	55	11.00
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	5	31	6.20
CANYON VISTA RECOVERY CENTER	5	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	5	27	5.40
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	1	5	5.00
CASA GRANDE INPATIENT	76	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	64	822	12.84
		F209 SCHIZOPHRENIA, UNSPECIFIED	16	140	8.75
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	14	94	6.71
CEDAR CITY HOSPITAL	1	S72001A FRACTURE OF UNSP PART OF NECK OF RIGHT FEMUR, INIT	1	5	5.00
CEDAR CREST HOSPITAL & RT	1	F315 BIPOLAR DISORD, CRNT EPSD DEPRESS, SEVERE, W PSYCH FEATURES	1	8	8.00

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CENTRAL CITY ADDICTION RE	54	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	26	243	9.35
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	24	226	9.42
		F319 BIPOLAR DISORDER, UNSPECIFIED	13	146	11.23
CHANDLER REGIONAL MEDICAL CENTER	22	A419 SEPSIS, UNSPECIFIED ORGANISM	11	106	9.64
		J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	6	30	5.00
		R0602 SHORTNESS OF BREATH	5	28	5.60
CHANGEPOINT PSYCHIATRIC HOSPITAL	10	R45851 SUICIDAL IDEATIONS	9	76	8.44
		F32A DEPRESSION, UNSPECIFIED	3	20	6.67
		F209 SCHIZOPHRENIA, UNSPECIFIED	2	29	14.50
COBRE VALLEY COMM HOSPITAL	4	J811 CHRONIC PULMONARY EDEMA	1	7	7.00
		L89154 PRESSURE ULCER OF SACRAL REGION, STAGE 4	1	7	7.00
		J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	2	6	3.00
		R4182 ALTERED MENTAL STATUS, UNSPECIFIED	1	6	6.00
COLLEGE MEDICAL CENTER PH	90	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	57	603	10.58
		R45851 SUICIDAL IDEATIONS	22	180	8.18
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	17	180	10.59
COMM EMERG PSYCHIATRIC	63	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	31	437	14.10
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	24	214	8.92
		F209 SCHIZOPHRENIA, UNSPECIFIED	24	392	16.33
COMMUNITY PARTNERS INTEGR	40	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	877	877	1.00
		F209 SCHIZOPHRENIA, UNSPECIFIED	497	497	1.00
		F200 PARANOID SCHIZOPHRENIA	278	278	1.00
COPPER QUEEN HOSPITAL	1	J441 CHRONIC OBSTRUCTIVE PULMONARY DISEASE W (ACUTE) EXACERBATION	1	4	4.00
COPPER SPRINGS	206	F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	130	1011	7.78
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	64	501	7.83
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	38	282	7.42
COPPER SPRINGS EAST	283	F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	163	1,237	7.59
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	120	888	7.40
		F322 MAJOR DEPRESSV DISORD, SINGLE EPSD, SEV W/O PSYCH FEATURES	59	436	7.39
CORNERSTONE BEHAVIORAL	103	F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	41	373	9.10
		F1123 OPIOID DEPENDENCE WITH WITHDRAWAL	39	254	6.51

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		F10239 ALCOHOL DEPENDENCE WITH WITHDRAWAL, UNSPECIFIED	39	222	5.69
CORNERSTONE SPECIALTY HOSPITAL	2	A4189 OTHER SPECIFIED SEPSIS	1	17	17.00
		J9600 ACUTE RESPIRATORY FAILURE, UNSP W HYPOXIA OR HYPERCAPNIA	1	17	17.00
CRISIS RESPONSE CENTER	83	F209 SCHIZOPHRENIA, UNSPECIFIED	36	236	6.56
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	36	246	6.83
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	19	116	6.11
DECISION POINT DETOX	4	F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	3	14	4.67
		F1320 SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE, UNCOMPLICATED	1	6	6.00
DEER VALLEY MEDICAL CENTER	21	A419 SEPSIS, UNSPECIFIED ORGANISM	15	69	4.60
		I110 HYPERTENSIVE HEART DISEASE WITH HEART FAILURE	5	23	4.60
		I130 HYP HRT & CHR KDNY DIS W HRT FAIL AND STG 1-4/UNSP CHR KDNY	4	12	3.00
DESERT MOUNTAIN HEALTH LL	16	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	11	47	4.27
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	7	49	7.00
		F1320 SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE, UNCOMPLICATED	1	6	6.00
DESERT WINDS HOSPITAL	1	F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	1	9	9.00
DESERT PRKWY BEH HLTH HSP	8	F319 BIPOLAR DISORDER, UNSPECIFIED	4	28	7.00
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	2	15	7.50
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	2	11	5.50
DESTINY SPRINGS HEALTHCARE	89	F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	44	342	7.77
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	42	336	8.00
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	26	192	7.38
DIGNITY HEALTH EAST VALLEY	1	Z4789 ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE	1	11	11.00
DIGNITY HLTH AZ GENERAL	8	J189 PNEUMONIA, UNSPECIFIED ORGANISM	4	9	2.25
		A419 SEPSIS, UNSPECIFIED ORGANISM	3	14	4.67
		E1010 TYPE 1 DIABETES MELLITUS WITH KETOACIDOSIS WITHOUT COMA	3	9	3.00
EAST VALLEY ADDICTION REC	61	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	32	288	9.00
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	23	183	7.96
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	15	88	5.87
EAST VALLEY ER HOSPITAL	1	M79644 PAIN IN RIGHT FINGER(S)	1	2	2.00
ENCOMPASS HEALTH VALLEY	2	S78112D COMPLETE TRAUMATIC AMP AT LEVEL BETW LEFT HIP AND KNEE, SUBS	1	11	11.00
		Z4789 ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE	1	9	9.00

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		I69351 HEMIPPLGA FOLLOWING CEREBRAL INFRC AFF RIGHT DOMINANT SIDE	1	8	8.00
ENCOMPASS REHAB EAST SHEA	1	S22089D UNSP FRACTURE OF T11-T12 VERTEBRA, SUBS FOR FX W ROUTN HEAL	1	15	15.00
ENCOMPASS REHAB EAST VALLEY	3	I69154 HEMIPPLGA FOLLOWING NTRM INTCRBL HEMOR AFF LEFT NONDOM SIDE	1	22	22.00
		I69151 HEMIPPLGA FOL NTRM INTCRBL HEMOR AFF RIGHT DOMINANT SIDE	2	21	10.50
		R5381 OTHER MALAISE	1	12	12.00
ENCOMPASS REHAB NW TUCSON	2	Z4781 ENCOUNTER FOR ORTHOPEDIC AFTERCARE FOLLOWING SURGICAL AMP	1	11	11.00
		Z4789 ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE	1	8	8.00
ENCOMPASS REHAB TUCSON	4	S066X0D TRAUM SUBRAC HEM W/O LOSS OF CONSCIOUSNESS, SUBS	2	22	11.00
		Z4789 ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE	1	20	20.00
		R5381 OTHER MALAISE	1	15	15.00
		S069X1D UNSP INTRACRANIAL INJURY W LOC OF 30 MINUTES OR LESS, SUBS	2	15	7.50
ESKENAZI HEALTH	1	F209 SCHIZOPHRENIA, UNSPECIFIED	1	8	8.00
FLAGSTAFF MEDICAL CENTER	11	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	5	34	6.80
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	3	72	24.00
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	3	21	7.00
FORT DEFIANCE INDIAN HOSPITAL	3	N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	1	4	4.00
		J45901 UNSPECIFIED ASTHMA WITH (ACUTE) EXACERBATION	1	3	3.00
		A0471 ENTEROCOLITIS DUE TO CLOSTRIDIUM DIFFICILE, RECURRENT	1	2	2.00
		A0472 ENTEROCOLITIS DUE TO CLOSTRIDIUM DIFFICILE, NOT SPECIFIED AS RECURRENT	1	2	2.00
		O24429 GESTATIONAL DIABETES MELLITUS IN CHILDBIRTH,	1	2	2.00
		R571 HYPOVOLEMIC SHOCK	1	2	2.00
HAVASU REGIONAL MEDICAL CENTER	4	R0602 SHORTNESS OF BREATH	2	4	2.00
		E1110 TYPE 2 DIABETES MELLITUS WITH KETOACIDOSIS WITHOUT COMA	1	19	19.00
		R112 NAUSEA WITH VOMITING, UNSPECIFIED	1	6	6.00
HAVEN BHVIORL HOSP OF PHX	299	F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	157	1,997	12.72
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	131	1,621	12.37
		F209 SCHIZOPHRENIA, UNSPECIFIED	53	693	13.08
HENDERSON HOSPITAL	1	K921 MELENA	1	22	22.00
HOLY CROSS HOSPITAL	2	O99344 OTHER MENTAL DISORDERS COMPLICATING CHILDBIRT	1	2	2.00
		I110 HYPERTENSIVE HEART DISEASE WITH HEART FAILURE	1	1	1.00

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HONORHEALTH FOUR PEAKS ME	8	A419 SEPSIS, UNSPECIFIED ORGANISM	4	23	5.75
		I130 HYP HRT & CHR KDNY DIS W HRT FAIL AND STG 1-4/UNSP CHR KDNY	4	14	3.50
		O34211 MATERNAL CARE FOR LOW TRANSVERSE SCAR FROM PR	2	4	2.00
HONORHEALTH REHAB HOSPITAL	2	S3282XD MULT FX OF PELV W/O DISRUPT OF PELV RING, 7THD	1	16	16.00
		I69351 HEMIPLGA FOLLOWING CEREBRAL INFRC AFF RIGHT DOMINANT SIDE	1	14	14.00
HONORHEALTH SCOTTSDALE OS	14	A419 SEPSIS, UNSPECIFIED ORGANISM	10	85	8.50
		L03116 CELLULITIS OF LEFT LOWER LIMB	3	11	3.67
		F10220 ALCOHOL DEPENDENCE WITH INTOXICATION, UNCOMPLICATED	3	5	1.67
HONORHEALTH SCOTTSDALE SHEA	9	O480 POST-TERM PREGNANCY	4	8	2.00
		E6601 MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	4	5	1.25
		D5700 HB-SS DISEASE WITH CRISIS, UNSPECIFIED	3	16	5.33
HONORHEALTH SCOTTSDALE TH	6	A419 SEPSIS, UNSPECIFIED ORGANISM	3	11	3.67
		T83511A INFECTION AND INFLAMMATORY REACTION DUE TO INDWELLING URETHRAL CATHETER, INITIAL	2	4	2.00
		F10231 ALCOHOL DEPENDENCE WITH WITHDRAWAL DELIRIUM	1	7	7.00
		N059 UNSP NEPHRITIC SYNDROME WITH UNSPECIFIED MORPHOLOGIC CHANGES	1	7	7.00
HONORHEALTH SONORAN CROSS	5	J189 PNEUMONIA, UNSPECIFIED ORGANISM	2	4	2.00
		E1010 TYPE 1 DIABETES MELLITUS WITH KETOACIDOSIS WITHOUT COMA	1	26	26.00
		O480 POST-TERM PREGNANCY	1	4	4.00
		T465X2A POISONING BY OTH ANTIHYPERTENSIVE DRUGS, SELF-HARM, INIT	1	4	4.00
HONORHEALTH TEMPE MEDICAL	7	A419 SEPSIS, UNSPECIFIED ORGANISM	2	14	7.00
		J189 PNEUMONIA, UNSPECIFIED ORGANISM	2	7	3.50
		F10231 ALCOHOL DEPENDENCE WITH WITHDRAWAL DELIRIUM	2	4	2.00
		I110 HYPERTENSIVE HEART DISEASE WITH HEART FAILURE	1	4	4.00
		L02511 CUTANEOUS ABSCESS OF RIGHT HAND	1	4	4.00
HUMBOLDT PARK HEALTH	1	F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	1	6	6.00
IHS CHINLE HOSPITAL	3	L03211 CELLULITIS OF FACE	1	4	4.00
		K810 ACUTE CHOLECYSTITIS	1	3	3.00
		N390 URINARY TRACT INFECTION, SITE NOT SPECIFIED	1	3	3.00

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IHS PHOENIX INDIAN MEDICAL CENTER	4	A0472 ENTEROCOLITIS DUE TO CLOSTRIDIUM DIFFICILE, NOT SPECIFIED AS RECURRENT	2	24	12.00
		R112 NAUSEA WITH VOMITING, UNSPECIFIED	2	6	3.00
		K921 MELENA	1	6	6.00
INTERMOUNTAIN HEALTH ST.	2	R0602 SHORTNESS OF BREATH	1	13	13.00
		R45851 SUICIDAL IDEATIONS	1	7	7.00
		R350 FREQUENCY OF MICTURITION	1	4	4.00
JOHN C LINCOLN MEDICAL CENTER	33	A419 SEPSIS, UNSPECIFIED ORGANISM	24	110	4.58
		J441 CHRONIC OBSTRUCTIVE PULMONARY DISEASE W (ACUTE) EXACERBATION	7	27	3.86
		N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	6	28	4.67
JOHN F. KENNEDY MEMORIAL	1	A419 SEPSIS, UNSPECIFIED ORGANISM	1	6	6.00
KINDRED HSPT LV-FLAMINGO	1	J9690 RESPIRATORY FAILURE, UNSP, UNSP W HYPOXIA OR HYPERCAPNIA	1	35	35.00
KINGMAN REGIONAL MEDICAL	11	J441 CHRONIC OBSTRUCTIVE PULMONARY DISEASE W (ACUTE) EXACERBATION	5	35	7.00
		J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	5	31	6.20
		J189 PNEUMONIA, UNSPECIFIED ORGANISM	4	17	4.25
LA FRONTERA CENTER INC.	60	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	371	2,247	6.06
		F209 SCHIZOPHRENIA, UNSPECIFIED	20	130	6.50
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	6	18	3.00
LA PAZ REGIONAL HOSPITAL	2	R079 CHEST PAIN, UNSPECIFIED	1	3	3.00
		R531 WEAKNESS	1	1	1.00
LITTLE COLORADO MED CTR	4	F10139 ALCOHOL ABUSE WITH WITHDRAWAL, UNSPECIFIED	1	4	4.00
		N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	1	4	4.00
		K567 ILEUS, UNSPECIFIED	1	3	3.00
		R109 UNSPECIFIED ABDOMINAL PAIN	1	3	3.00
LOVELACE MEDICAL CENTER	1	R0600 DYSPNEA, UNSPECIFIED	1	3	3.00
MARICOPA COMMUNITY HOSPITAL	1	R112 NAUSEA WITH VOMITING, UNSPECIFIED	1	2	2.00
MAYO CLINIC HOSPITAL	4	R112 NAUSEA WITH VOMITING, UNSPECIFIED	2	5	2.50
		I130 HYP HRT & CHR KDNY DIS W HRT FAIL AND STG 1-4/UNSP CHR KDNY	1	16	16.00
		R0902 HYPOXEMIA	1	14	14.00
MEMORIAL HEALTH SYSTEM	1	M542 CERVICALGIA	1	1	1.00

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MERCY GILBERT MEDICAL CENTER	13	A419 SEPSIS, UNSPECIFIED ORGANISM	6	22	3.67
		R0602 SHORTNESS OF BREATH	4	14	3.50
		N390 URINARY TRACT INFECTION, SITE NOT SPECIFIED	3	13	4.33
MERCY HOSPITAL NORTHWEST	1	R109 UNSPECIFIED ABDOMINAL PAIN	1	3	3.00
		K820 OBSTRUCTION OF GALLBLADDER	1	1	1.00
MOGOLLON TREATMENT CENTER	23	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	20	135	6.75
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	7	44	6.29
		F1520 OTHER STIMULANT DEPENDENCE, UNCOMPLICATED	3	20	6.67
MOHAVE MENTAL HEALTH CLINC	29	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	28	277	9.89
		F209 SCHIZOPHRENIA, UNSPECIFIED	9	95	10.56
		F1520 OTHER STIMULANT DEPENDENCE, UNCOMPLICATED	4	22	5.50
MOUNTAIN VALLEY REG REHAB	1	I69398 OTHER SEQUELAE OF CEREBRAL INFARCTION	1	4	4.00
MT. GRAHAM REG. MED. CTR.	1	R0902 HYPOXEMIA	1	7	7.00
NORTHERN COCHISE HOSPITAL	1	R509 FEVER, UNSPECIFIED	1	4	4.00
NORTHERN NAVAJO MEDICAL C	1	E871 HYPO-OSMOLALITY AND HYPONATREMIA	1	12	12.00
NORTHRIDGE HOSPITAL MEDICAL	1	A419 SEPSIS, UNSPECIFIED ORGANISM	1	11	11.00
NORTHWEST MEDICAL CENTER	3	R109 UNSPECIFIED ABDOMINAL PAIN	2	13	6.50
		R339 RETENTION OF URINE, UNSPECIFIED	1	12	12.00
		J159 UNSPECIFIED BACTERIAL PNEUMONIA	1	8	8.00
NORTHWEST MEDICAL CENTER	7	E222 SYNDROME OF INAPPROPRIATE SECRETION OF ANTIDIURETIC HORMONE	2	8	4.00
		L97909 NON-PRS CHRONIC ULC UNSP PRT OF UNSP LOW LEG W UNSP SEVERITY	1	4	4.00
		E876 HYPOKALEMIA	1	3	3.00
		F15121 OTHER STIMULANT ABUSE WITH INTOXICATION DELIRIUM	1	3	3.00
		F909 ATTENTION-DEFICIT HYPERACTIVITY DISORDER, UNS	1	3	3.00
		I82402 ACUTE EMBOLISM AND THOMBOS UNSP DEEP VEINS OF L LOW EXTREM	1	3	3.00
		J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	1	3	3.00
		R059 COUGH, UNSPECIFIED	1	3	3.00
R0602 SHORTNESS OF BREATH	1	3	3.00		
NORTHWEST MEDICAL CENTER	18	A419 SEPSIS, UNSPECIFIED ORGANISM	11	86	7.82

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Table 1b – SFY 2025 Hospitalizations By Facility - 1/1/2025 To 6/30/25 ³					
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		R112 NAUSEA WITH VOMITING, UNSPECIFIED	4	18	4.50
		R079 CHEST PAIN, UNSPECIFIED	4	11	2.75
NORTHWEST TEXAS HOSPITAL	3	F3164 BIPOLAR DISORD, CRNT EPISODE MIXED, SEVERE, W PSYCH FEATURES	1	15	15.00
		F23 BRIEF PSYCHOTIC DISORDER	1	9	9.00
		I214 NON-ST ELEVATION (NSTEMI) MYOCARDIAL INFARCTION	1	1	1.00
OASIS BEHAVIORAL HEALTH HOSPITAL	124	F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	63	521	8.27
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	43	276	6.42
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	37	288	7.78
ORO VALLEY HOSPITAL	3	N390 URINARY TRACT INFECTION, SITE NOT SPECIFIED	1	10	10.00
		A409 STREPTOCOCCAL SEPSIS, UNSPECIFIED	1	9	9.00
		T63001A TOXIC EFFECT OF UNSP SNAKE VENOM, ACCIDENTAL, INIT	1	7	7.00
ORO VALLEY HOSPITAL PSYCH	30	R45851 SUICIDAL IDEATIONS	26	150	5.77
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	5	27	5.40
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	4	19	4.75
PAGE HOSPITAL	2	K8000 CALCULUS OF GALLBLADDER W ACUTE CHOLECYST W/O OBSTRUCTION	1	2	2.00
		Z515 ENCOUNTER FOR PALLIATIVE CARE	1	1	1.00
PALO VERDE BEHAVIORAL HEALTH	129	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	77	889	11.55
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	62	722	11.65
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	21	226	10.76
PHOENIX CHILDRENS HOSPITAL	3	Q225 EBSTEIN'S ANOMALY	1	8	8.00
		N319 NEUROMUSCULAR DYSFUNCTION OF BLADDER, UNSPECIFIED	1	7	7.00
		I371 NONRHEUMATIC PULMONARY VALVE INSUFFICIENCY	1	1	1.00
PHOENIX MEDICAL PSYCHIATRY	186	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	90	1,219	13.54
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	77	1,021	13.26
		F209 SCHIZOPHRENIA, UNSPECIFIED	38	475	12.50
PHOENIX SPECIALTY HOSPITAL	1	J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	2	45	22.50
PINNACLE PEAK RECOVERY, L	1	F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	1	1	1.00
POLARA HEALTH	7	F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	3	13	4.33
		F209 SCHIZOPHRENIA, UNSPECIFIED	2	18	9.00
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	2	14	7.00
PRESBYTERIAN HOSPITAL	2	R0602 SHORTNESS OF BREATH	1	2	2.00

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		E1110 TYPE 2 DIABETES MELLITUS WITH KETOACIDOSIS WITHOUT COMA	1	1	1.00
PRONGHORN PSYCHIATRY	20	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	13	231	17.77
		F315 BIPOLAR DISORD, CRNT EPSD DEPRESS, SEVERE, W PSYCH FEATURES	6	68	11.33
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	5	27	5.40
PURPOSE HEALING CENTER	50	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	129	129	1.00
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	49	58	1.18
		F1110 OPIOID ABUSE, UNCOMPLICATED	5	5	1.00
QUAIL RUN BEHAVIORAL HEALTH	117	F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	61	478	7.84
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	34	281	8.26
		F251 SCHIZOAFFECTIVE DISORDER, DEPRESSIVE TYPE	31	289	9.32
REHABILITATION HOSPITAL	1	Z4789 ENCOUNTER FOR OTHER ORTHOPEDIC AFTERCARE	1	13	13.00
REUNION REHABILITATION HOSPITAL	2	S12390D OTH DISP FX OF FOURTH CERVICAL VERT, SUBS FOR FX W ROUTN HEAL	1	17	17.00
		I69398 OTHER SEQUELAE OF CEREBRAL INFARCTION	1	8	8.00
REUNION REHABILITATION HOSPITAL	3	S72421D DISP FX OF LATERAL CONDYLE OF R FEMR, 7THD	1	18	18.00
		I69354 HEMIPLGA FOLLOWING CEREBRAL INFRC AFFECTING LEFT NONDOM SIDE	1	16	16.00
		S82142D DISPL BICONDYLAR FX L TIBIA, SUBS FOR CLOS FX W ROUTN HEAL	1	13	13.00
RHODE ISLAND HOSPITAL	1	F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	1	14	14.00
ROYAL LIFE CENTERS	3	F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	1	7	7.00
		F1220 CANNABIS DEPENDENCE, UNCOMPLICATED	1	1	1.00
		F4320 ADJUSTMENT DISORDER, UNSPECIFIED	1	1	1.00
SAGE MEMORIAL HOSPITAL	1	G40901 EPILEPSY, UNSP, NOT INTRACTABLE, WITH STATUS EPILEPTICUS	1	2	2.00
SAN JUAN REG MED CTR-NM	2	E871 HYPO-OSMOLALITY AND HYPONATREMIA	1	5	5.00
		K56609 UNSPECIFIED INTESTINAL OBSTRUCTION, UNSPECIFIED AS TO PARTIAL VERSUS COMPLETE OB	1	1	1.00
SBH CRU 1	56	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	76	411	5.41
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	50	250	5.00
		F209 SCHIZOPHRENIA, UNSPECIFIED	43	207	4.81
SBH CRU 2	51	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	41	185	4.51
		F209 SCHIZOPHRENIA, UNSPECIFIED	54	259	4.80
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	29	122	4.21
SBH KRU	34	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	24	105	4.38

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		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	16	95	5.94
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	5	14	2.80
SBH RTP	44	F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	86	509	5.92
		F209 SCHIZOPHRENIA, UNSPECIFIED	94	573	6.10
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	53	323	6.09
SELECT SPECIALTY HOSPITAL	2	J9690 RESPIRATORY FAILURE, UNSP, UNSP W HYPOXIA OR HYPERCAPNIA	1	28	28.00
		J9600 ACUTE RESPIRATORY FAILURE, UNSP W HYPOXIA OR HYPERCAPNIA	1	24	24.00
SELECT SPECIALTY HOSP-PHX	2	J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	2	36	18.00
SELECT SPECIALTY-PHX D T	1	J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	1	25	25.00
SONORA BEHAVIORAL HEALTH	216	F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	186	2,421	13.02
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	49	465	9.49
		F339 MAJOR DEPRESSIVE DISORDER, RECURRENT, UNSPECIFIED	35	274	7.83
SOUTHERN HILLS HOSPITAL	1	F319 BIPOLAR DISORDER, UNSPECIFIED	1	6	6.00
SPRING MOUNTAIN TREATMENT	3	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	1	7	7.00
		F319 BIPOLAR DISORDER, UNSPECIFIED	1	7	7.00
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	1	6	6.00
ST JOSEPHS HOSPITAL AND MEDICAL	65	A419 SEPSIS, UNSPECIFIED ORGANISM	56	286	5.11
		R569 UNSPECIFIED CONVULSIONS	8	29	3.63
		N179 ACUTE KIDNEY FAILURE, UNSPECIFIED	9	22	2.44
ST JOSEPHS HOSP-TUCSON	16	A419 SEPSIS, UNSPECIFIED ORGANISM	6	54	9.00
		J189 PNEUMONIA, UNSPECIFIED ORGANISM	6	23	3.83
		J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	4	19	4.75
ST JOSEPHS WESTGATE MEDICAL	4	J189 PNEUMONIA, UNSPECIFIED ORGANISM	1	6	6.00
		J439 EMPHYSEMA, UNSPECIFIED	1	4	4.00
		J4551 SEVERE PERSISTENT ASTHMA WITH (ACUTE) EXACERBATION	1	4	4.00
		T83511A INFECTION AND INFLAMMATORY REACTION DUE TO INDWELLING URETHRAL CATHETER, INITIAL	1	4	4.00
ST LUKES BEHAVIORAL HOSPITAL	30	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	15	171	11.40
		R45851 SUICIDAL IDEATIONS	12	81	6.75
		R451 RESTLESSNESS AND AGITATION	4	56	14.00
ST MARYS HOSPITAL	23	A419 SEPSIS, UNSPECIFIED ORGANISM	13	70	5.38

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Facility Name	Total Distinct Member Count	Top 3 Primary Admitting Diagnosis	Hospitalizations		
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		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	5	38	7.60
		R45851 SUICIDAL IDEATIONS	5	21	4.20
SUMMIT HEALTHCARE REG.MED	15	R0602 SHORTNESS OF BREATH	8	35	4.38
		R079 CHEST PAIN, UNSPECIFIED	4	12	3.00
		R109 UNSPECIFIED ABDOMINAL PAIN	3	10	3.33
SUMMIT HEALTHCARE REGIONAL	3	R45851 SUICIDAL IDEATIONS	2	11	5.50
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	1	15	15.00
		F10129 ALCOHOL ABUSE WITH INTOXICATION, UNSPECIFIED	1	7	7.00
SUNRISE HOSPITAL AND MEDICAL	5	A419 SEPSIS, UNSPECIFIED ORGANISM	4	28	7.00
		S8011XA CONTUSION OF RIGHT LOWER LEG, INITIAL ENCOUNTER	1	24	24.00
		K254 CHRONIC OR UNSPECIFIED GASTRIC ULCER WITH HEMORRHAGE	1	15	15.00
THE GUIDANCE CTR- VICKE	20	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	13	127	9.77
		F209 SCHIZOPHRENIA, UNSPECIFIED	8	67	8.38
		F251 SCHIZOAFFECTIVE DISORDER, DEPRESSIVE TYPE	5	36	7.20
THE RIVER SOURCE TRMNT CR	7	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	6	29	4.83
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	2	10	5.00
TON SELLS HOSPITAL	3	H66001 ACUTE SUPPR OTITIS MEDIA W/O SPON RUPT EAR DRUM, RIGHT EAR	1	2	2.00
		L03116 CELLULITIS OF LEFT LOWER LIMB	1	2	2.00
		R569 UNSPECIFIED CONVULSIONS	1	2	2.00
TOOLE INPATIENT	38	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	21	217	10.33
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	13	89	6.85
		F209 SCHIZOPHRENIA, UNSPECIFIED	10	35	3.50
TUBA CITY REGIONAL HEALTH	3	R0602 SHORTNESS OF BREATH	1	9	9.00
		E1110 TYPE 2 DIABETES MELLITUS WITH KETOACIDOSIS WITHOUT COMA	1	6	6.00
		A419 SEPSIS, UNSPECIFIED ORGANISM	1	5	5.00
TUCSON MEDICAL CENTER	30	A419 SEPSIS, UNSPECIFIED ORGANISM	15	105	7.00
		J189 PNEUMONIA, UNSPECIFIED ORGANISM	9	70	7.78
		R0602 SHORTNESS OF BREATH	8	60	7.50
TUCSON MEDICAL CENTER RIN	4	E1110 TYPE 2 DIABETES MELLITUS WITH KETOACIDOSIS WITHOUT COMA	1	19	19.00
		L03116 CELLULITIS OF LEFT LOWER LIMB	1	11	11.00
		N390 URINARY TRACT INFECTION, SITE NOT SPECIFIED	1	6	6.00

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		R0602 SHORTNESS OF BREATH	1	6	6.00
UNHOOKED RECOVERY POWER	24	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	62	62	1.00
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	32	32	1.00
		F1320 SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE, UNCOMPLICATED	18	18	1.00
UNITED HOSPITAL	1	F10221 ALCOHOL DEPENDENCE WITH INTOXICATION DELIRIUM	1	20	20.00
UNIVERSITY MED CTR-LUBOCK	1	F10239 ALCOHOL DEPENDENCE WITH WITHDRAWAL, UNSPECIFIED	1	10	10.00
UNIVERSITY NM HOSP-ALBQ	1	F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	1	5	5.00
UNIVERSITY OF COLORADO HO	2	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	1	17	17.00
		R4781 SLURRED SPEECH	1	2	2.00
UPC INPATIENT	54	F209 SCHIZOPHRENIA, UNSPECIFIED	21	313	14.90
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	20	236	11.80
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	16	239	14.94
URGENT PSYCHIATRIC CENTER	90	F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	44	524	11.91
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	26	277	10.65
		F319 BIPOLAR DISORDER, UNSPECIFIED	20	141	7.05
URGENT PSYCHIATRIC CENTER	86	F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	36	534	14.83
		F209 SCHIZOPHRENIA, UNSPECIFIED	28	317	11.32
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	28	206	7.36
UTAH VALLEY HOSPITAL	1	N136 PYONEPHROSIS	1	14	14.00
VALLEY HOSPITAL	223	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	141	1,219	8.65
		F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	69	522	7.57
		F251 SCHIZOAFFECTIVE DISORDER, DEPRESSIVE TYPE	65	489	7.52
VALLEY VIEW MEDICAL CENTER	4	O76 ABNLT IN FETAL HEART RATE AND RHYTHM COMP LAB	2	7	3.50
		I70221 ATHSCL NATIVE ARTERIES OF EXTREMITIES W REST PAIN, RIGHT LEG	1	9	9.00
		S72001A FRACTURE OF UNSP PART OF NECK OF RIGHT FEMUR, INIT	1	7	7.00
VALLEYWISE HEALTH MEDICAL	727	F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	466	7,438	15.96
		F209 SCHIZOPHRENIA, UNSPECIFIED	248	4,603	18.56
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	187	3,426	18.32
VERDE VALLEY MEDICAL CENTER	6	A419 SEPSIS, UNSPECIFIED ORGANISM	2	26	13.00
		K8520 ALCOHOL INDUCED ACUTE PANCREATITIS WITHOUT NECROSIS OR INFECTION	2	11	5.50

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		J9601 ACUTE RESPIRATORY FAILURE WITH HYPOXIA	2	5	2.50
		R531 WEAKNESS	2	5	2.50
VIA LINDA BEHAVIORAL HOSPITAL	204	F332 MAJOR DEPRESSV DISORDER, RECURRENT SEVERE W/O PSYCH FEATURES	152	1,185	7.80
		F333 MAJOR DEPRESSV DISORDER, RECURRENT, SEVERE W PSYCH SYMPTOMS	77	609	7.91
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	13	110	8.46
VIRTUE DETOX LLC	12	F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	9	50	5.56
		F1120 OPIOID DEPENDENCE, UNCOMPLICATED	6	42	7.00
		F1520 OTHER STIMULANT DEPENDENCE, UNCOMPLICATED	1	2	2.00
VIRTUE RECOVERY CENTER	38	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	29	149	5.14
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	14	83	5.93
VOGUE RECOVERY CENTER	45	F1120 OPIOID DEPENDENCE, UNCOMPLICATED	31	162	5.23
		F1020 ALCOHOL DEPENDENCE, UNCOMPLICATED	18	93	5.17
		F1520 OTHER STIMULANT DEPENDENCE, UNCOMPLICATED	8	38	4.75
WEST ANAHEIM MEDICAL CTR	1	R7989 OTHER SPECIFIED ABNORMAL FINDINGS OF BLOOD CHEMISTRY	1	1	1.00
WEST VALLEY INPATIENT	89	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	48	573	11.94
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	29	243	8.38
		F209 SCHIZOPHRENIA, UNSPECIFIED	24	289	12.04
WEST YAVAPAI GUIDANCE CLINIC	23	F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	13	48	3.69
		F32A DEPRESSION, UNSPECIFIED	8	19	2.38
		F209 SCHIZOPHRENIA, UNSPECIFIED	6	19	3.17
WESTERN ARIZONA REGIONAL	8	J441 CHRONIC OBSTRUCTIVE PULMONARY DISEASE W (ACUTE) EXACERBATION	3	21	7.00
		J189 PNEUMONIA, UNSPECIFIED ORGANISM	2	10	5.00
		A419 SEPSIS, UNSPECIFIED ORGANISM	2	9	4.50
		G9341 METABOLIC ENCEPHALOPATHY	2	9	4.50
WHITE MNTN REG MED CNTR	3	A4151 SEPSIS DUE TO ESCHERICHIA COLI [E. COLI]	1	4	4.00
		J159 UNSPECIFIED BACTERIAL PNEUMONIA	1	3	3.00
		E871 HYPO-OSMOLALITY AND HYPONATREMIA	1	2	2.00
WHITERIVER INDIAN HOSPITAL	2	R0902 HYPOXEMIA	2	4	2.00
WICKENBURG COMMUNITY HOSPITAL	1	F10939 ALCOHOL USE, UNSPECIFIED WITH WITHDRAWAL, UNS	1	2	2.00

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WINDHAVEN PSYCHIATRIC HOSPITAL	33	F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	18	175	9.72
		F209 SCHIZOPHRENIA, UNSPECIFIED	17	165	9.71
		F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	7	52	7.43
YAVAPAI REG MED CENTER	13	A419 SEPSIS, UNSPECIFIED ORGANISM	6	46	7.67
		L03115 CELLULITIS OF RIGHT LOWER LIMB	5	34	6.80
		J189 PNEUMONIA, UNSPECIFIED ORGANISM	4	22	5.50
YUMA INPATIENT AND CRISIS	44	F250 SCHIZOAFFECTIVE DISORDER, BIPOLAR TYPE	31	205	6.61
		F29 UNSP PSYCHOSIS NOT DUE TO A SUBSTANCE OR KNOWN PHYSIOL COND	26	254	9.77
		F259 SCHIZOAFFECTIVE DISORDER, UNSPECIFIED	16	105	6.56
YUMA REGIONAL MEDICAL CENTER	14	R45851 SUICIDAL IDEATIONS	10	55	5.50
		A419 SEPSIS, UNSPECIFIED ORGANISM	3	33	11.00
		R4182 ALTERED MENTAL STATUS, UNSPECIFIED	3	22	7.33
YUMA REHABILITATION HOSPITAL	1	G7281 CRITICAL ILLNESS MYOPATHY	1	14	14.00

Facility-level data for SFY 2025 demonstrates clear distinctions between behavioral health facilities and general medical hospitals in both hospitalization volume and length of stay for members with an SMI designation. Behavioral health inpatient treatment facilities such as Aurora Behavioral Health, Valleywise Health, Copper Springs, and Haven Behavioral consistently report the highest hospitalization counts, often exceeding several hundred admissions per reporting period. The higher hospitalization counts may be attributed to the geographic placement of these facilities within Arizona’s most densely populated regions, combined with their greater operational capacity to accommodate large volumes of patients with various treatment needs. These facilities also exhibit longer treatment durations, with average lengths of stay (ALOS) typically ranging from 8 to 15 days, reflecting the complexity of psychiatric care and stabilization needs for members with an SMI designation.

Further analysis indicates that certain psychiatric disorders are associated with significantly longer inpatient treatment durations for members with an SMI designation. Among these, Schizophrenia, Unspecified (F209) consistently demonstrates the highest average length of stay, with treatment episodes averaging approximately 13 days. Schizoaffective Disorder, Unspecified (F259) and Schizoaffective Disorder, Bipolar Type (F250) also consistently exhibit extended hospitalization periods, averaging 12 to 13 days across multiple behavioral health facilities. These diagnoses are prevalent in facilities with the largest admission volumes, underscoring the intensive clinical management required for individuals with severe psychotic and mood disorders. The nature and severity of functional impairment associated with psychotic disorders, such as Schizophrenia and Schizoaffective Disorders, often contribute

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to a condition called anosognosia meaning limited insight, in addition to impaired judgment and challenges in recognizing the need for treatment. As a result, individuals with these conditions are more likely to necessitate longer periods of time to stabilize symptoms that may result in the person being a danger to self and/or others. In these circumstances, Court-Ordered Treatment (COT) may be necessary for stabilization when the person is unable to engage voluntarily in interventions, including antipsychotic medication and community support. Psychotic disorders also impair functioning in other domains in life, such as employment and stable housing. Symptoms such as paranoia, disorganized thinking, delusional beliefs, and difficulty with interpersonal interactions can pose a challenge to compliance with the required expectations of an employer or landlord, increasing vulnerability to homelessness. The extended lengths of stay for individuals with these diagnoses reflect both the complex nature of symptom stabilization and the significant clinical and social needs that must be addressed for safe discharge. These findings highlight the necessity for prioritization of statewide resource availability to support the behavioral health continuum of care treatment providers and strong cross-system coordination to ensure successful community integration and long-term stability for this population.

Conversely, general medical hospitals, including various Abrazo and Banner campuses, show significantly lower hospitalization volumes of members with an SMI designation, generally fewer than 30 admissions per reporting period, and shorter ALOS, typically between 2 and 5 days. These patterns align with acute medical interventions rather than the extended psychiatric treatment necessary for individuals with an SMI designation due to the nature of their illnesses.

When comparing the two reporting periods, facility data remained largely stable with the second half of SFY 2025 demonstrating a modest increase in ALOS among top behavioral health providers. AHCCCS will continue to monitor trends in admitting diagnoses, length of stay, and the availability and quality of continuum of care services to support individuals with SMI. To reduce the need for hospitalization, AHCCCS is actively engaging in collaborative initiatives including the Housing and Health Opportunities (H2O), Secure Behavioral Health Residential Facility, the Whole Person Initiative, analysis of and revisions to Court Ordered Treatment to improve operationalization and statewide consistency in this process, and a training curriculum for Arizona's workforce related to the specialized treatment needs of this population.

Co-Occurring Disorders and Inpatient Readmissions

Table II presents the number and percentage of members with an SMI designation and co-occurring substance use disorder diagnosis who were admitted, discharged, and subsequently readmitted to an inpatient psychiatric facility within the preceding year.

Table II – SFY 2025 Co-Occurring Disorders and Inpatient Readmissions - 7/1/24 To 12/31/24

	Distinct Member Count	Distinct Member Count with Admit/Discharge/Readmit	Percent Of Those Members Who Were Admitted, Discharged, And Readmitted to an Inpatient Psychiatric Facility
Members With Mental Health Disorder and Co-Occurring Substance Use Diagnosis	15,162	1,595	10.52%

Table II – SFY 2025 Co-Occurring Disorders and Inpatient Readmissions - 1/1/24 To 12/30/25

	Distinct Member Count	Distinct Member Count with Admit/Discharge/Readmit	Percent Of Those Members Who Were Admitted, Discharged, And Readmitted to an Inpatient Psychiatric Facility
Members With Mental Health Disorder and Co-Occurring Substance Use Diagnosis	14,979	1,360	9.08%

During the first half of SFY 2025, 15,162 members with an SMI designation and a co-occurring substance use disorder admitted to inpatient psychiatric facilities. In the second half of the fiscal year, this figure decreased slightly to 14,979 members. These numbers highlight the prevalence of members with an SMI designation and comorbid substance use disorder diagnosis cases that require inpatient care as over 30,000 admissions across the reporting periods are observed.

Furthermore, readmission rates, 10.52% in the first half of SFY 2025 and 9.08% in the second half, accentuate the complexity of these cases and the challenges in achieving sustained stability; readmissions demonstrate that members with co-occurring diagnoses sometimes require extended or repeated interventions to achieve clinical stability. The reciprocal relationship between substance use disorders and mental health disorders often results in more profound functional impairment for individuals with these co-occurring disorders. The presence of an existing mental health disorder may trigger exacerbation of a substance use disorder, and the existence of a substance use disorder may similarly exacerbate symptoms of a mental health disorder.

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Additionally, the effects of many substances mimic the symptoms of serious mental illnesses including hallucinations, delusional thinking, mania, and psychosis resulting in challenges in assessment and treatment planning. These factors, in addition to the addictive nature of abused substances, result in the need for repeated intervention. These trends emphasize the importance of Arizona’s person-centered, integrated system of care approach to reduce the likelihood of readmission and improve long-term outcomes for members with an SMI designation by treating the whole person.

Title XIX Enrollment in No Pay Status Due to Incarceration

Table III provides the number and percentage of members with a Serious Mental Illness (SMI) designation whose Title XIX enrollment was suspended (placed in ‘no-pay’ status) due to incarceration. The data are further categorized by the frequency of enrollment suspensions during the reporting period. Each member is counted only once, in the category representing the highest number of suspensions they experienced. Percentages reflect the proportion of SMI members in each category relative to all SMI members whose enrollment was suspended due to incarceration during the reporting period. It is important to note that not all carceral settings currently exchange automated booking and release information with AHCCCS; thus the reported data is a reflection of facilities with whom this data is exchanged or are reported to AHCCCS by other means.

Table III – SFY 2025 Title XIX Enrollment in No Pay Status Due To Incarceration - 7/1/24 To 12/31/24

	Member Count	Member Percentage
Total Number Placed in No-Pay Status Once During the Reporting Period	2,623	70.30%
Total Number Placed in No-Pay Status Twice During the Reporting Period	754	20.21%
Total Number Placed in No-Pay Status Three Times During the Reporting Period	230	6.16%
Total Number Placed in No-Pay Status Four Or More Times During the Reporting Period	124	3.32%

Table III – SFY 2025 Title XIX Enrollment In No Pay Status Due To Incarceration - 1/1/25 To 6/30/25

	Member Count	Member Percentage
Total Number Placed in No-Pay Status Once During the Reporting Period	2,632	70.54%
Total Number Placed in No-Pay Status Twice During the Reporting Period	774	20.75%
Total Number Placed in No-Pay Status Three Times During the Reporting Period	224	6.00%

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Total Number Placed in No-Pay Status Four Or More Times During the Reporting Period	121	3.24%
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During SFY 2025, the number of members with an SMI designation whose Title XIX enrollment status was placed in No Pay Status once during the reporting periods remained stable, with 2,623 members in the first half of the year compared to 2,632 in the second half, indicating no significant change in initial suspension rates. Members experiencing two suspensions increased slightly from 754 to 774, suggesting a marginal rise in repeated suspensions. For those with three suspensions, counts were consistent, with 230 in the first half and 224 in the second. Cases involving four or more suspensions showed minimal variation, declining slightly from 124 to 121, which suggests that chronic incarceration and repeated suspension remain rare but persistent. Overall, these patterns reflect stability in enrollment suspension trends, with only minor fluctuations across reporting periods. In light of initiatives related to pre-release services for individuals in a carceral setting, such as the Consolidated Appropriations Act of 2023 targeting increased engagement in services prior to and after release, AHCCCS is monitoring first time and recidivism of incarceration of members with an SMI designation.

Release from Incarceration Reach-in Services

Table IV indicates the reported number of members with an SMI designation in which AHCCCS was notified of a release from incarceration, were eligible for reach-in services, and for whom the contractor provided reach-in services. Data from all AHCCCS contracted health plans using AMPM Policy 1022 deliverables in conjunction with data pulled directly from the data warehouse was used to identify the reporting elements.

Table IV - SFY2025 Release from Incarceration Reach-in Services - 7/1/24 to 12/31/24

	Distinct SMI Member Count
Number Of Members for Whom AHCCCS Is Notified of Release from Incarceration	522
Number Who Received Reach-In Services	427

Table IV - SFY2025 Release from Incarceration Reach-in Services - 1/1/25 to 6/30/25

	Distinct SMI Member Count
Number Of Members for Whom AHCCCS Is Notified of Release from Incarceration	557
Number Who Received Reach-In Services	218

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During the first half of SFY 2025 (July 1, 2024 – December 31, 2024), AHCCCS was notified of 522 members with an SMI designation who were released from incarceration, of which 427 individuals received reach-in services. In the second half of SFY 2025 (January 1, 2025 – June 30, 2025), AHCCCS was notified of 557 members released from incarceration, with 218 individuals receiving reach-in services. The decline in reach-in engagement during the latter period coincides with changes in data collection methods and adjustments to health plan reporting requirements; as such, the trended decrease reflected in this data is believed to be related to revisions in the data collection and will be further and comparatively analyzed with the next mid-year data for trends. AHCCCS continues to refine and standardize processes for identifying and reporting these data elements and will implement revised policy and deliverable requirements in the upcoming year to improve consistency and accuracy in reporting and analysis of justice involved members with SMI. AHCCCS is working closely with the justice liaisons at the health plans and various personnel at the carceral settings for improved collaborative release planning including regular meetings and collective problem-solving, refining the benefit application and suspension/enrollment of benefits processes for those being released to ensure timely access to needed care, and formalizing pre-release connections between members and providers in their communities. The Consolidated Appropriations Act of 2023 initiated by AHCCCS on October 1, 2025, requires certain pre-release services, including targeted case management, assessment, and service planning for qualifying individuals up to age 27 who are leaving carceral settings for up to 30 days prior to release. Additionally, the 1115 Reentry Demonstration initiative will allow individuals of any age who meet AHCCCS eligibility requirements and are inmates in a qualified carceral setting to receive certain pre-release services for up to 90 days prior to release. As statewide carceral settings and providers become engaged with these pre-release services, AHCCCS anticipates an increase in the number of people with an SMI designation who receive and benefit from pre-release services.

Response to Crisis and Crisis Utilization

Table V aggregates data from the ACC-RBHA crisis deliverable report to indicate crisis response as well as claims data to identify distinct member counts of those who have had two or more distinct crisis episodes.

Table V – SFY 2025 Response to Crisis and Crisis Utilization - 7/1/24 To 12/31/24

	Distinct SMI Member Count
Number Of Responses by Crisis System	38,088
Number Of Crisis Phone Calls Received	17,274
Number Of Mobile Teams Dispatched	6,079
Number Of Members Seen at Psychiatric Urgent Care Centers	14,735
Number Of Members with Two Or More Distinct Crisis System Episodes	1,882

Table V – SFY 2025 Response to Crisis and Crisis Utilization - 1/1/25 To 6/30/25

	Distinct SMI Member Count
Number Of Responses by Crisis System	36,248

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Number Of Crisis Phone Calls Received	14,566
Number Of Mobile Teams Dispatched	6,318
Number Of Members Seen at Psychiatric Urgent Care Centers	15,364
Number Of Members with Two Or More Distinct Crisis System Episodes	1,692

During State Fiscal Year 2025, Arizona’s crisis system maintained a robust level of engagement in supporting members designated with Serious Mental Illness (SMI). The system recorded a total of 74,336 crisis responses involving individuals with an SMI designation, underscoring the critical role of crisis services in addressing acute behavioral health needs within this population.

During the first half of State Fiscal Year 2025 (July 1, 2024, through December 31, 2024), the crisis system recorded a total of 38,088 responses involving members with a Serious Mental Illness (SMI) designation. These responses included 17,274 crisis phone calls, 6,079 mobile team dispatches, and 14,735 visits to Crisis Stabilization Units. Notably, 1,882 members experienced two or more distinct crisis episodes during this period, indicating a subgroup with repeated acute needs.

In the second half of the fiscal year (January 1, 2025, through June 30, 2025), total crisis responses decreased slightly to 36,248. While crisis phone calls declined by 15.6 percent to 14,566, mobile team dispatches increased by 4 percent to 6,318, and Crisis Stabilization Unit visits rose by 4.3 percent to 15,364. Additionally, 1,692 members experienced multiple crisis episodes during this period, continuing to highlight the need for targeted interventions for individuals with recurring crises.

Key Observations and Trends

- **Shift Toward Intensive Interventions:** Despite a modest decline in total crisis contacts, there was a discernible shift toward more intensive, in-person interventions. Mobile team dispatches and Crisis Stabilization Unit visits both increased in the second half of the fiscal year, indicating higher acuity or preference for face-to-face crisis management among SMI members.
- **Community Stabilization Success:** Mobile teams achieved community stabilization in approximately 66-69% of SMI cases when accounting for cancellations. This reflects effective crisis resolution efforts aimed at minimizing inpatient admissions.
- **Response Times and Challenges:** Average mobile team response times ranged from 40 to 50 minutes, with some variability due to geographic and operational factors. Ongoing efforts focus on reducing delays and cancellations to enhance timely crisis response.
- **Persistent Recurrence:** The consistent number of SMI members experiencing multiple crisis episodes (nearly 1,800 in the first half and 1,700 in the second half) underscores the need for strengthened follow-up and targeted community-based supports to reduce crisis recurrence and improve long-term stability.
- **Demographic Representation:** The crisis system served a diverse SMI population, including Title XIX/XXI and Non-Title XIX/XXI members, reflecting the system’s reach across vulnerable groups.
- **Primary Crisis Reasons:** Suicidal ideation/self-harm, social concerns, anxiety, psychosis, and substance use/abuse were the predominant presenting problems among SMI crisis contacts.

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- **Readmission Monitoring:** Readmission rates to crisis stabilization units within 72 hours, 30, 60, and 90 days were tracked, with ongoing initiatives to improve crisis follow-up care and reduce readmissions among SMI members.

System Enhancements and Data Quality

- Collaborative efforts with our crisis lines administrator and crisis providers have enhanced data collection accuracy, including weekly internal disposition reviews and monthly meetings hosted by AHCCCS to address reporting challenges with the ACC-RBHAs and crisis providers.
- Interventions to reduce mobile team cancellations and improve dispatch efficiency are actively pursued through coordination between the ACC-RBHAs and the crisis lines administrator, with attention to regional and population-specific needs. ACC-RBHAs engage in regular data analysis to ensure sufficient mobile team coverage and response congruous with the needs of individual communities.
- Crisis stabilization facilities continue to monitor admissions, discharges, and community discharge rates. Collected data is reported to ACC-RBHAs and AHCCCS on a monthly basis. ACC-RBHAs utilize this data to identify gaps in services and implement additional resources, aiming to optimize care transitions for SMI individuals.

SMI Mortality

Tables VI below demonstrate the number of statewide mortality incidents and rates for AHCCCS members with an SMI determination in SFY 2025⁴. AHCCCS and ADHS have a data sharing agreement by which ADHS shares vital record information necessary for calculating mortality trends for members determined SMI.

Table VI – SFY 2025 SMI Mortality - 7/1/24 To 12/31/24⁵

Manner of Death	All SMI		
	# Of Mortalities	% Of Mortalities	Rate Per 1,000
Accident	274	31.90%	4.20
Homicide	10	1.16%	0.15
Natural Death	526	61.23%	8.07
Suicide	39	4.54%	0.60
Undetermined	10	1.16%	0.15
Summary	859	100%	13.17

⁴ It is important to note that these numbers differ from those published in the Annual Behavioral Health Legislative Report and the Annual SMI Legislative Report, which incorporate additional data after coroner reports are finalized to ensure accuracy. This data is pulled at an earlier date than the SFY2025 Annual BH and Annual SMI Reports due to the report due date.

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Table VI – SFY 2025 SMI Mortality³ - 1/1/25 To 6/30/25⁵

Manner of Death	All SMI		
	# Of Mortalities	% Of Mortalities	Rate Per 1,000
Accident	305	32.66%	4.68
Homicide	11	1.18%	0.17
Natural Death	558	59.74%	8.57
Suicide	47	5.03%	0.72
Undetermined	13	1.39%	0.20
Summary	934	100%	14.34

During SFY 2025, mortality data related to members with an SMI designation remains a consistent indicator of member outcomes. In the first half of the fiscal year (July 1, 2024 – December 31, 2024), 859 deaths were reported, equating to a rate of 13.7 deaths per 1,000 members with SMI. Natural causes accounted for the majority of these deaths, with 526 cases occurring at a rate of eight deaths per 1,000 members. Accidental deaths represented the second most common manner of death, with 274 cases, or 4.2 deaths per 1,000 members. In the second half of the fiscal year (January 1, 2025 – June 30, 2025), mortality increased slightly, with 934 deaths reported, corresponding to a rate of 14.34 deaths per 1,000 members with an SMI designation. Natural causes continued to be the leading manner of death, with 558 cases at a rate of 8.6 deaths per 1,000 members, while accidental deaths remained the second most frequent, with 305 cases, also at 4.2 deaths per 1,000 members. These figures demonstrate a slight increase in overall mortality between reporting periods, however the distribution of causes remained consistent.

SMI Homelessness Data

Tables VIIa and VIIb represent the number of members who are homeless, unsheltered or inadequately housed and for what period using the Housing Management Information System (HMIS) to populate Table 7b.

Table VIIa – SFY 2025 SMI Homelessness Data - 7/1/24 to 12/31/24

	Distinct SMI Member Count
Total Number with Identified Issues Related To Housing	2,085
Homeless And Sheltered	1,585
Homeless And Unsheltered	1,495
Inadequate Housing	953

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Table VIIa – SFY 2025 SMI Homelessness Data - 1/1/25 to 6/30/24

	Distinct SMI Member Count
Total Number with Identified Issues Related To Housing	4,833
Homeless And Sheltered	1,922
Homeless And Unsheltered	1,508
Inadequate Housing	1,403

Table VIIb – SFY 2025 SMI Members Found on the Housing Management Information System - 7/1/24 to 12/31/24

Days On Waitlist	Distinct SMI Member Count
0-30	8
31-90	22
91-183	35
184-365	217
366-730	1,825
731-1,095	1,144
1,096-1,460	1,134
1,461-1,825	369
1,826-2,190	135
>2,190	108

Table VIIb – SFY 2025 SMI Members Found on the Housing Management Information System - 1/1/25 To 6/30/25

Days On Waitlist	Distinct SMI Member Count
0-30	3
31-90	18

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91-183	215
184-365	927
366-730	1,683
731-1,095	1,066
1,096-1,460	1,096
1,461-1,825	350
1,826-2,190	112
>2,190	118

Members represented in this dataset are identified through the application of specific “Z Codes” within their diagnostic profiles. Under the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), Z Codes denote psychosocial and environmental factors that warrant clinical attention but do not constitute a mental disorder. These codes are used to document circumstances that may influence diagnostic decisions, treatment planning, and overall clinical outcomes rather than identifying a primary diagnosis. Historically, providers have inconsistently applied and underutilized Z Codes across treatment settings. Arizona’s initiatives including Targeted Investments 2.0, Whole Person Care, the Closed Loop Referral System, and Housing and Health Opportunities (H2O) have strengthened requirements for data collection and incentivize comprehensive coding related to social determinants of health, including housing instability. Consequently, while housing-related concerns among members with an SMI designation remain underreported in member profiles, the substantial increase observed in the latter half of the reporting period may be attributed to improved identification practices and enhanced data collection standards rather than a significant change in housing insecurity. AHCCCS will continue to monitor these trends and collaborate with stakeholders to encourage the consistent application of Z Codes to promote thorough data collection.

Behavioral Health Residential Facilities (BHRF)

Table VIII presents the number of Title XIX and Non-Title XIX members with an SMI designation who were admitted to and discharged from a Behavioral Health Residential Facility during SFY 2025. The table also includes members admitted to an inpatient psychiatric hospital during the reporting period who had previously been discharged from a Behavioral Health Residential Facility within the prior year.

Table VIII- SFY 2025 Behavioral Health Residential Facilities (BHRF) - 7/1/24 To 12/31/24⁶

	Title XIX Member Count	Non-Title Member Count
Members Admitted into A BHRF	4,024	166

⁶ The total for inpatient psychiatric hospital admissions includes all admissions within the reporting period that have at least one corresponding BHRF discharge in the year preceding the admission.

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Members Discharged from A BHRF	4,022	165
Members Admitted to an Inpatient Psychiatric Hospital Within 1 Year After Discharge From a BHRF	1,725	43

Table VIII – SFY 2025 Behavioral Health Residential Facilities (BHRF) - 1/1/25 To 6/30/25⁶

Facility Name	Title XIX Member Count	Non-Title Member Count
SMI Members Admitted into A BHRF	4,160	186
SMI Members Discharged from A BHRF	4,147	187
SMI Members Admitted to an Inpatient Psychiatric Hospital Within 1 Year After Discharge From a BHRF	1,857	43

An examination of Behavioral Health Residential Facility (BHRF) utilization during SFY 2025 reveals stable service delivery with slight increases in both admissions and discharges across reporting periods. For Title XIX members, admissions rose from 4,024 in the first half of the year to 4,160 in the second, while discharges increased from 4,022 to 4,147, indicating consistent utilization of BHRF facilities. Inpatient psychiatric hospital admissions within one year of a BHRF discharge increased from 1,725 to 1,857, reflecting that some individuals with an SMI designation experience challenges in maintaining stability post-residential treatment. For non-Title XIX members, admissions and discharges grew modestly from 166 and 165 to 186 and 187, respectively, while inpatient psychiatric hospital readmissions remained unchanged at 43.

Court Ordered Treatment (COT)

Tables IX reflect unique counts of members with an SMI designation who were subject to court-ordered treatment during the reporting period as reported by the health plans. It outlines the number of SMI members in SFY 2025 who received a court order for treatment and associated behavioral health services, requested and obtained removal of an SMI designation, complied with court-ordered treatment requirements, or did not receive any behavioral health services.

Table IX – SFY 2025 Court Ordered Treatment (COT) - 7/1/24 To 12/31/24

	Distinct SMI Member Count
Members Who Received a Court Order for Treatment	1434
SMI Members on COT Who Requested the Removal of an SMI Determination	0
SMI Members Who Have Demonstrated Adherence To COT	1394

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SMI Members with an Active COT Who Did Not Receive Any Services	3
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Table IX – SFY 2025 Court Ordered Treatment (COT) - 1/1/25 To 6/30/25

	Distinct SMI Member Count
Members Who Received a Court Order for Treatment	1385
SMI Members on COT Who Requested the Removal of an SMI Determination	1 (denied)
SMI Members Who Have Demonstrated Adherence To COT	1355
SMI Members with an active COT Who Did Not Receive Any Services	2

The data for SFY 2025 demonstrates consistently high adherence to court-ordered treatment among members with an SMI designation. In the first half of the fiscal year, 1,434 members received a court order for treatment, and 1,394 complied, resulting in an adherence rate of approximately 97 percent. For this report, adherence to Court-ordered Treatment (COT) was defined as members who did not need to have the COT amended or tolled within the first six months of being on COT. An amendment to a court order may occur when the individual is not complying with the terms of the order and necessitates inpatient treatment. The period of court ordered treatment is tolled during an unauthorized absence of the individual. Within 5 days after a patient’s unauthorized absence, the treatment agency shall file a notice with the court providing the date that the absence began and request that the treatment order be tolled. Only three members with an active COT did not receive any behavioral health services (one of whom was incarcerated throughout the reporting period, thus would not bill AHCCCS for services), and no requests for removal of an SMI designation were submitted. In the second half of the reporting period, the number of members who received a court order for treatment decreased slightly to 1,385, with 1,355 adhering to treatment, maintaining a compliance rate near 98 percent. Requests for removal of an SMI designation remained rare, with only one request submitted and denied, and the number of members who did not receive services dropped to two. These findings indicate strong oversight and effective engagement strategies, ensuring that individuals under court order consistently receive behavioral health services and comply with treatment requirements.

State Hospital Discharges and Inpatient Psychiatric Admissions

Tables X indicates the number of members with SMI during SFY 2025 who were discharged from the Arizona State Hospital (ASH) and admitted to a contracted psychiatric hospital within the previous year.

Table X – SFY 2025 State Hospital Discharges and Inpatient Psychiatric Admissions - 7/1/24 To 12/31/24

	Distinct SMI Member Count
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Total SMI Discharges from the Arizona State Hospital	29
Total SMI Members admitted into a Psychiatric Hospital within one year of discharge from the Arizona State Hospital	17

Table X – SFY 2025 State Hospital Discharges and Inpatient Psychiatric Admissions - 1/1/25 To 6/30/25

Facility Name	Distinct SMI Member Count
Total Discharges from the Arizona State Hospital	17
Total Members Admitted into A Psychiatric Hospital Within One Year of Discharge from the Arizona State Hospital	12

During the first half of State Fiscal Year (SFY) 2025, spanning July 1, 2024, through December 31, 2024, 29 members with a Serious Mental Illness (SMI) designation were discharged from the Arizona State Hospital (ASH). Of those previously discharged, 17 were admitted to a psychiatric hospital within one year of their ASH discharge.

In the second half of SFY 2025, covering January 1, 2025, through June 30, 2025, the number of ASH discharges declined to 17, representing a 41 percent decrease compared to the first half of the year. Similarly, the number of members admitted to a psychiatric hospital following an ASH discharge in the preceding year decreased to 12, a reduction of approximately 29 percent. AHCCCS will continue to monitor patterns of admission, discharge, and re-admissions into a psychiatric hospital within one year of discharge to inform strategies aimed at ensuring person-centered and effective continuity of care statewide for members with an SMI designation.

AHCCCS Members Evaluated for SMI Eligibility

Tables XI reflect the number of members with SMI during SFY 2025 who:

- a. Were evaluated for an SMI eligibility determination,
- b. Whose eligibility determination resulted in receiving an SMI designation and
- c. The number of members whose eligibility determination resulted in not receiving a SMI designation.

Table XI – SFY 2025 AHCCCS Members Evaluated for SMI Eligibility - 7/1/24 To 12/31/24

Facility Name	Distinct Member Count
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Evaluated For SMI Eligibility	5,780
Designated	3,980
Not Designated	1,800

Table XI – SFY 2025 AHCCCS Members Evaluated for SMI Eligibility - 1/1/25 To 6/30/25

	Distinct Member Count
Evaluated For SMI Eligibility	4,684
Designated	2,455
Not Designated	2,229

During the first half of State Fiscal Year (SFY) 2025 (July 1, 2024, through December 31, 2024), AHCCCS conducted 5,780 evaluations for Serious Mental Illness (SMI) eligibility. Of these, 3,980 members (68.8%) were designated as having an SMI, while 1,800 members (31.2%) were determined not to meet the criteria. In the second half of SFY 2025 (January 1, 2025, through June 30, 2025), the number of evaluations decreased to 4,684, a reduction of approximately 19% compared to the first half. Of those evaluated, 2,455 members (52.4%) received an SMI designation, and 2,229 members (47.6%) did not. The most frequent reasons identified for members not receiving a SMI designation are that the member did not either have a qualifying SMI diagnosis or despite the qualifying diagnosis, the member did not demonstrate the functional impairment criteria as a result of the symptoms of the diagnosis. AHCCCS will collaborate with stakeholders to identify potential causation related to the increased number of members who did not meet criteria for SMI such as changes in referrals, assessment, or the diagnostic presentation of referred individuals. AHCCCS will continue to monitor trends specific to referrals for SMI eligibility and designation decisions.

Medicare/Medicaid Dual Enrollment Members

Tables XII indicates the number of members with SMI during SFY 2025 number who were also known to AHCCCS to be enrolled in Medicare. The number of distinct TXIX and Non-TXIX Dual Enrollment Members known to AHCCCS in each quarter is identified in these tables. Member enrollment is updated when AHCCCS receives enrollment information from Medicare; the effective date is based upon the date AHCCCS receives the Medicare record. If a prospective date is indicated on the Medicare record, then the effective date will be according to that date. AHCCCS receives enrollment information from Medicare on a daily basis.

Table XII – SFY 2025 Medicare/Medicaid Dual Enrollment SMI Members

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Distinct Members	Quarter 1, Known To AHCCCS	Quarter 2, Known To AHCCCS	Quarter 3, Known To AHCCCS	Quarter 4, Known To AHCCCS
TXIX Dual Enrollment Members	23,981	23,914	23,844	23,754
Non-TXIX Dual Enrollment Members	14,710	14,623	14,571	14,502

Conclusion

This report fulfills the legislative mandate under Senate Bill 1311 (Laws 2024, Chapter 163; ARS §36-502(C)) requiring annual monitoring and reporting of clinical outcomes for Arizona Medicaid members with a Serious Mental Illness (SMI) designation. As indicated in the implementation plan submitted December 2024, AHCCCS completed one data analysis in preparation of this first report. In future reports, AHCCCS will include narrative regarding trends identified during the bi-annual data analysis process and actions taken to address trends as necessary and applicable in each section of the report. Covering State Fiscal Year (SFY) 2025, the report spans two reporting periods, July 1, 2024 through December 31, 2024 and January 1, 2025 through June 30, 2025, and provides a comprehensive review of hospitalization trends, crisis system utilization, incarceration-related enrollment changes, and other key indicators of service delivery. These findings provide a picture of service utilization and member outcomes, highlighting areas where system performance remained strong and areas where continued monitoring and targeted strategies are necessary to address complex needs among individuals with an SMI designation. AHCCCS remains committed to leveraging these insights to inform policy, strengthen provider accountability, and advance evidence-based strategies that improve outcomes for individuals with SMI in Arizona.