

ARIZONA STATE SENATE

RESEARCH STAFF



TO: MEMBERS OF THE SENATE
HEALTH & HUMAN SERVICES
COMMITTEE

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SUBJECT: Strike everything amendment to S.B. 1609, relating to behavioral health; AHCCCS; health facilities

Purpose

Establishes requirements of the Arizona Health Care Cost Containment System related to peer specialist oversight and services for individuals with a serious mental illness (SMI). Requires a health care institution that is transferring or discharging a patient with an SMI to another health care institution to provide the patient with a 30-day supply of all medication that the patient was given in the previous 10 days.

Background

An SMI is a mental disorder that causes an individual to exhibit emotional or behavioral functioning that is so impaired as to interfere substantially with their capacity to remain in the community without supportive treatment or services of a long-term or indefinite duration. In these persons, mental disability is severe and persistent, resulting in a long-term limitation of functional capacities for primary activities of daily living such as interpersonal relationships, homemaking, self-care, employment and recreation ([AHCCCS](#)).

Individuals with an SMI that are seeking services through AHCCCS must go through a determination process to formally receive an SMI designation. This process requires the individual to submit documentation of mental illness and how it has affected the person's quality of life. It is also possible the individual may be required to meet face-to-face with a clinician for assessment. Additionally, the SMI must result in 1) an inability to live independently without adequate support; 2) a risk of serious harm to self or others; 3) a dysfunction in role performance; or 4) a risk of deterioration if adequate supports and services are not provided. An individual with an SMI designation who is at least 18 years old has access to services that may help improve quality of life and the ability to live independently ([AHCCCS](#)).

AHCCCS provides peer support services to members who may need more personalized support than natural supports or community-based recovery groups, such as 12 Step groups, can provide. Peer specialists generally have a personal history of behavioral health recovery and utilize lived experiences to help people by promoting recovery-oriented environments. Peer specialists work with individuals throughout recovery by sharing skills, coaching and providing support ([AHCCCS](#)).

If there is a cost associated with the monitoring and training of peer specialists or the development of an SMI member survey, there may be a cost to the state General Fund.

Provisions

SMI Medication

1. Requires a health care institution that is transferring or discharging a patient with an SMI to another health care institution to provide the patient with a 30-day supply of all medication, both prescription and over-the-counter, that the patient was given in the previous 10 days, whether ongoing or to be taken as needed.

2. Requires each medication to include clear, documented instructions that are signed by the patient or the patient's parent or guardian, the discharge team and the intake team.

Personal Health Information

3. Directs AHCCCS to require its contractors to review and minimize duplicative paperwork requirements and limit the number of contractors and entities that unnecessarily receive personal health information of members with an SMI who are receiving services.
4. Prohibits contractors from selling or benefiting financially from any member's personal health information.

Peer Specialists

5. Requires AHCCCS to develop and implement processes to monitor its contractors' oversight of peer specialists to ensure that peer specialists meet qualifications and receive required supervision.
6. Requires peer specialists to complete training developed by AHCCCS that includes psychosis-specific content, including anosognosia.
7. Requires AHCCCS, beginning November 1, 2024, to annually submit a report to the Governor, President of the Senate and Speaker of the House of Representatives regarding:
 - a) the development and implementation of required peer specialist monitoring; and
 - b) the monitoring and outcomes of using peer specialists in providing behavioral health services to members.

Miscellaneous

8. Requires AHCCCS to develop and implement a real-time automated survey for members with SMI and the member's parent, guardian or caregiver, if applicable, to collect feedback, identify quality of care issues and respond to member needs.
9. Makes technical changes.
10. Becomes effective on the general effective date.