



### **Section 3.22** Out-of-State Placements for Children and Young Adults

- I. Statement of Purpose
- II. References
- III. Standards
- IV. Procedures
  - A. General requirements
  - B. Conditions to be met before an out-of-state referral is made
  - C. Individual Service Plan
  - D. Initial notification
  - E. Periodic updates

#### **I. STATEMENT OF PURPOSE:**

At times, it may be necessary to consider an out-of-home placement for a child or young adult to meet the person's unique circumstances or clinical needs. The following factors may lead the person's Child and Family Team (CFT) and/or Adult Recovery Team (ART) to consider the temporary placement of a child or young adult:

1. A child or young adult needs specialized programming not currently available in Arizona to effectively treat a specified behavioral health condition;
2. An out-of-state placement's approach to treatment may incorporate and supports the child's or young adult's unique cultural heritage;
3. A lack of current in-state bed capacity may occur; and/or
4. Geographical proximity encourages support and facilitates family involvement in the person's treatment.

The Arizona Health Care Cost Containment System (AHCCCS) expects that decisions to place children or young adults in out-of-state placements for behavioral health care and treatment are examined closely and are made after the CFT or ART have reviewed all other in-state options. Other options may include the provision of support services in the context of the person's current living situation, single case agreements with in-state providers that would allow enhanced programming or staffing patterns to meet the specific needs of the person, or the development of an Individualized Service Plan (ISP) that incorporates a combination of support services and clinical interventions and takes advantage of the full extent of all available covered services to meet the clinically identified needs of the child or young adult. If an out-of-state placement is necessary and supported by the CFT or ART, Tribal Regional Behavioral Health Authorities (TRBHAs) and their providers must follow the steps and procedures outlined in this section. In addition, services provided out-of-state must meet appointment standards and timelines specified in *Section 3.2, Appointment Standards and Timeliness of Service*.



## II. **REFERENCES:**

The following Pascua Yaqui (PY) Centered Spirit Program (CSP) Provider Manual sections can serve as additional resources for this content area:

*Section 3.2 Appointment Standards and Timeliness of Service*

*Section 3.9, Assessment and Service Planning*

*Section 3.14, Securing Services and Prior Authorization*

The following citation and AHCCCS document also serve as resources for this content area:

R9-21-101 et seq.

AHCCCS/TRBHA Intergovernmental Agreement (IGA) 2021

## III. **STANDARDS:**

To ensure that out-of-state placements for persons under the age of 21:

1. Serve the individual needs of the person; and
2. Are determined to be more appropriate and beneficial than available in-state services.

## IV. **PROCEDURES:**

### A. General requirements:

When considering an out-of-state placement for a child or young adult, the following conditions apply:

1. The CFT or ART will consider all applicable and available in-state services and determine that the services do not adequately meet the specific needs of the person and the person's family/guardian (not including those not under guardianship between 18 and under 21 years of age) is in agreement with the out-of-state placement;
2. The out-of-state placement is registered as an AHCCCS provider;
3. The out-of-state placement meets the Arizona Department of Education academic standards; and
4. A plan for the provision of non-emergency medical care must be established.



B. Conditions to be met before a referral for out-of-state placement is made:

Documentation in the clinical record must indicate that the following conditions have been met before a referral for an out-of-state placement is made:

1. All less restrictive clinically appropriate approaches have either been provided or considered by the CFT or ART and found not to meet the person's needs;
2. The CFT or ART has been involved in the service planning process, and is in agreement with the out-of-state placement;
3. The CFT or ART has determined how they will remain active and involved in service planning once the out-of-state placement has occurred;
4. A proposed ISP that includes a discharge plan has been developed that addresses the needs and strengths of the person (see *Section 3.9, Assessment and Service Planning*);
5. All applicable prior authorization requirements have been met (see *Section 3.14, Securing Services and Prior Authorization*);
6. The Arizona Department of Education has been consulted to ensure that the educational program in the out-of-state placement meets the [Arizona Department of Education academic standards](#) and the specific educational needs of the person;
7. Coordination has occurred with other state agencies involved with the person;
8. The person's AHCCCS Health Plan has been contacted and a plan for the provision of any necessary non-emergency medical care has been established and is included in the comprehensive clinical record; and
9. Cultural considerations have been explored and incorporated into the service plan.

C. Individualized Service Plan (ISP):

For a person placed out-of-state, the ISP developed by the CFT or ART must require that:

1. Discharge planning is initiated at the time of referral, including:



- a. The measurable treatment goals being addressed by the out-of-state placement and the criteria necessary for discharge back to in-state services;
  - b. The possible or proposed in-state residence where the person will be returning to and the recommended services and supports required once the person returns from the out-of-state placement;
  - c. What needs to be changed or arranged to accept the person for subsequent in-state placement to meet the person's needs;
  - d. How effective strategies implemented in the out-of-state placement will be transferred to the persons' subsequent in-state placement; and
  - e. The actions necessary to integrate the person into family and community life upon discharge.
2. The CFT or ART actively reviews the person's progress with clinical staffing occurring at least every 30 days. Clinical staffing must include the staff of the out-of-state facility;
  3. The person's family/guardian is involved throughout the duration of the placement; this may include family counseling in person or by telehealth;
  4. The CFT or ART must ensure that essential and necessary health care services are provided; and
  5. Home passes are allowed as clinically appropriate. For youth in Child Protective Services (CPS) or Department of Child Safety (DCS) custody, home passes must be determined only in close collaboration with CPS or DCS.
- D. Initial notification to AHCCCS:

TRBHAs or subcontracted behavioral health providers are required to notify the AHCCCS prior to a referral for out-of-state placement and upon discovering that a TRBHA enrollee is in an out-of-state placement using PM Form 3.22.1, Out-of-State Placement, Initial Notice. TRBHAs may ask that providers assist with supplying the information required on the form and with providing copies of supporting clinical documentation. Prior authorization must be obtained prior to making a referral for out-of-state placement, in accordance with TRBHA criteria (see *Section 3.14, Securing Services and Prior Authorization*).



Process for providing initial notification to AHCCCS:

The TRBHA completes PM Form 3.22.1, Out-of-State Placement, Initial Notice, and a request for prior authorization, and compiles supporting clinical documentation in accordance with *Section 3.14, Securing Services and Prior Authorization*. PM Form 3.22.1 is then submitted via fax or e-mail to AHCCCS Office of Utilization Management along with the request for prior authorization using the established prior authorization request.

E. Periodic updates to AHCCCS:

In addition to providing initial notification, every 90 days the TRBHA is required to submit updates to AHCCCS regarding the person's progress in meeting the identified criteria for discharge from the out-of-state placement. TRBHAs must use PM Form 3.22.2, Out-of-State Placement, 90-Day Update, to adhere to this requirement. TRBHAs may ask that providers assist with providing the information required on the form.

TRBHAs must complete PM Form 3.22.2 and submit the form via facsimile or email to the AHCCCS Office of Utilization Management every 90 days that the person continues to remain in out-of-state placement