COMMITTEE ON APPROPRIATIONS

HOUSE OF REPRESENTATIVES AMENDMENTS TO S.B. 1257

(Reference to Senate engrossed bill)

1	Strike everything after the enacting clause and insert:
2	"Section 1. Section 8-527, Arizona Revised Statutes, is amended to
3	read:
4	8–527. <u>Children in out-of-home care: noninterference with</u>
5	<u>regular school activities</u>
6	The agency, division and department of health services ARIZONA HEALTH
7	CARE COST CONTAINMENT SYSTEM ADMINISTRATION in accordance with section
8	36–3435, subsection B , shall make every reasonable effort to not remove a
9	child who is placed in out-of-home care from school during regular school
10	hours for appointments, visitations or activities not related to school.
11	Sec. 2. Section 11-297, Arizona Revised Statutes, is amended to read:
12	11-297. <u>Seriously mentally ill; county responsibility;</u>
13	definition
14	A. Notwithstanding section 11–291:
15	1. A county that has a population of less than six hundred thousand
16	persons must provide the benefit levels and categories of services for the
17	behavioral health treatment, behavioral health hospitalization and behavioral
18	health medical care of persons who are seriously mentally ill as required by
19	law as of January 1, 2001.
20	2. A county that has a population of more than six hundred thousand
21	persons but less than two million persons and that has an intergovernmental
22	agreement with the department of health services in effect as of January 1,
23	2001 for the delivery of behavioral health and mental health care services
24	must annually renew the MAINTAIN AN agreement WITH THIS STATE to provide for
25	the integration of the system at the same funding amount, except for the
26	funding for court-ordered screening and evaluation pursuant to title 36,
27	chapter 5, article 4.
28	3. A county that has a population of more than two million persons and
29	that has an intergovernmental agreement with the department of health
30	services in effect as of January 1, 2001 for the delivery of services to the
31	seriously mentally ill must annually renew the MAINTAIN AN agreement WITH
32	THIS STATE to provide for the integration of the system at the same terms and
33	funding amount and with a mutually agreed on annual adjustment for inflation.
34	B. For the purposes of this section, "seriously mentally ill" has the
35	same meaning prescribed in section 36–550.
36	Sec. 3. Section 15–765, Arizona Revised Statutes, is amended to read:
37	15–765. <u>Special education in rehabilitation, corrective or</u>
38	<u>other state and county supported institutions,</u>
39	<u>facilities or homes</u>
40	A. For the purposes of this section and section 15-764, children with
41	disabilities who are being provided with special education in rehabilitation,

1 corrective or other state and county supported institutions or facilities are 2 the responsibility of that institution or facility, including children with 3 disabilities who are not enrolled in a residential program and who are being 4 furnished with daily transportation. Special education programs at the 5 institution or facility shall conform to the conditions and standards 6 prescribed by the director of the division of special education.

7 B. Notwithstanding subsection A of this section, the department of 8 economic security, the department of child safety or the department of health 9 services ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM may request on behalf of a school-age child with a disability residing in a residential facility or 10 foster home operated or supported by the department of economic security, the 11 12 department of child safety or the department of health services ARIZONA 13 HEALTH CARE COST CONTAINMENT SYSTEM that the school district in which the 14 facility or home is located enroll the school-age child in the district, 15 subject to section 15-825. The school district, on the request by the 16 department of economic security, the department of child safety or the 17 department of health services ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM, 18 shall enroll the child and provide any necessary special education and related services, subject to section 15-766. A school district in which a 19 20 child with a disability is enrolled shall coordinate the development of an individualized education program with the development of an individual 21 22 program or treatment plan. The provision of special education and related 23 services to a child with a disability may be subject to subsection D of this 24 section.

C. Before any placement is made in facilities described in this section, the school district of residence shall ensure that a full continuum of alternative placements is available to meet the needs of children with disabilities and that the proposed placement is the least restrictive environment in which appropriate education services can be provided to the child.

31 A school district or county school superintendent may contract D. 32 with, and make payments to, other public or private schools, institutions and 33 agencies approved by the division of special education, within or without the school district or county, for the education of and provision of services to 34 children with disabilities if section 15-766 and the conditions and standards 35 prescribed by the division of special education have been met and if unable 36 37 to provide satisfactory education and services through its own facilities and personnel in accordance with the rules prescribed by the state board of 38 education as provided in section 15-213. No school district may contract or 39 40 make payments under the authority of this section or section 15-764 or any other provisions of law for the residential or educational costs of placement 41 42 of children with disabilities in an approved private special education 43 school, institution or agency unless the children are evaluated and placed by 44 a school district. The following special provisions apply in order to 45 qualify for the group B ED-P weight:

If the child is placed in a private special education program, the
 chief administrative official of the school district or county or other
 person designated by the school district or county as responsible for special

education shall verify that the pupil is diagnosed with an emotional
 disability as defined in section 15-761, that no appropriate program exists
 within the school district or county, as applicable, and that no program can
 feasibly be instituted by the school district or county, as applicable.

5 2. If the child is placed in a special program that provides intensive 6 services within a school district, the chief administrative official of the 7 school district or county or other person as designated by the school 8 district or county as responsible for special education shall verify that the 9 pupil placed in such a program is diagnosed with an emotional disability as 10 defined in section 15-761 and that appropriate services cannot be provided in 11 traditional resource and self-contained special education classes.

12 E. When a state placing agency initially places a pupil in a private 13 residential facility, the home school district must conduct an evaluation 14 pursuant to section 15-766 or review the educational placement of a pupil who 15 has previously been determined eligible for special education services. The 16 school district shall notify the appropriate state placing agency when a child requires an evaluation for possible receipt of services provided by 17 18 that agency or a residential special education placement. The school 19 district and the state agency shall jointly evaluate the child, including 20 consideration of relevant information from additional sources, including 21 probation or parole officers, caseworkers, guardians ad litem and court 22 appointed special advocates.

F. If the child is not eligible for special education or does not
 require residential special education placement, sections 15-1182 and 15-1183
 apply.

G. If the individualized education program team determines that a residential special education placement is the least restrictive environment in which an appropriate educational program can be provided, the home school district shall submit the following documentation to the department of education:

A residential special education voucher application signed by
 designated representatives of the state placing agency, as defined in section
 15-1181, and the home school district, respectively.

2. The educational reasons for recommending the residential special education placement, including an evaluation or addendum to the evaluation that describes the instructional and behavioral interventions that were previously attempted and the educational reasons for recommending the residential special education placement, including documentation that the nature or severity of the disability is such that education in a less restrictive environment is not appropriate.

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3. Exit criteria as required in subsection K of this section.

4. That prior written notice for a change in the child's placement wasprovided.

H. If a residential special education placement is required by the
 child's individualized education program, the educational component of the
 residential facility shall be one that is approved by the department of
 education for the specific special education services required.

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I. The residential component of the facility in which the residential special education placement is made shall be licensed by the department of economic security, the department of child safety or the department of health services, whichever is appropriate.

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5 J. Following and in accordance with the consensus decision of the individualized education program team as prescribed in section 15-766, a 7 residential special education placement shall be made by the school district and the appropriate state agency. The individualized education program team 8 9 shall determine whether a residential special education placement is 10 necessary. The state placing agency shall consider the recommendations of 11 the individualized education program team in selecting the specific 12 residential facility. The department of education shall enter into 13 interagency services agreements with the department of economic security, the 14 department of child safety or the department of health services ARIZONA 15 HEALTH CARE COST CONTAINMENT SYSTEM to establish a mechanism for resolving 16 disputes if the school district and the department of economic security, the 17 department of child safety or the department of health services ARIZONA 18 HEALTH CARE COST CONTAINMENT SYSTEM cannot mutually agree on the specific 19 residential placement to be made. Dispute resolution procedures may not be 20 used to deny or delay residential special education placement.

21 K. The individualized education program for any child who requires residential special education placement must include exit criteria that 22 23 indicate when the educational placement of the child shall be reviewed to 24 determine whether the child can be moved to a less restrictive placement.

25 L. All noneducational and nonmedical costs incurred by the placement 26 of a child with a disability in a private or public school program and 27 concurrent out-of-home care program shall be paid by the department of economic security for those children eligible to receive services through the 28 29 division of developmental disabilities, by the department of child safety for 30 the children for which it has legal responsibility and by the department of 31 health services ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM for those 32 children eligible to receive BEHAVIORAL HEALTH OR CHILDREN'S REHABILITATION 33 services through the division of behavioral health in the department of 34 health services or children's rehabilitation services ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM ADMINISTRATION. This section does not prevent or 35 36 limit the department of health services ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM, the department of child safety and the department of economic 37 38 security from joint case management of any child who qualifies for services from two or more of these agencies or from sharing the noneducational costs 39 of providing those services. The educational costs incurred by the placement 40 of a child with a disability in an out-of-home care facility shall be paid as 41 42 follows:

43 1. Through a residential special education placement voucher as 44 provided in section 15-1184 if the child is determined to require a residential special education placement as defined in section 15-761. 45

46 2. Through an initial or continuing residential education voucher if a 47 child is placed in a private residential facility by a state placing agency,

as defined in section 15–1181, for care, treatment and safety reasons and the child needs educational services while in that placement.

3. Through a certificate of educational convenience if the child is attending a public school not within the child's school district of residence as provided in section 15-825.

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4. By the home school district, pursuant to a contract with a public or private school as provided in subsection D of this section, if the home school district is unable to provide satisfactory education and services through its own facilities and personnel.

M. The department of economic security, the department of child safety 10 11 or the department of health services ARIZONA HEALTH CARE COST CONTAINMENT 12 SYSTEM, whichever is appropriate, shall determine if the child placed for 13 purposes of special education in a private or public school and concurrent 14 out-of-home care is covered by an insurance policy that provides for 15 inpatient or outpatient child or adolescent psychiatric treatment. The 16 appropriate state agency may only pay charges for treatment costs that are 17 not covered by an insurance policy. Notwithstanding any other law, the 18 appropriate state agency may pay for placement costs of the child before the 19 verification of applicable insurance coverage. On the depletion of insurance 20 benefits, the appropriate state agency shall resume payment for all 21 noneducational and nonmedical costs incurred in the treatment of the child. The appropriate state agency may request the child's family to contribute a 22 23 voluntary amount toward the noneducational and nonmedical costs incurred as a 24 result of residential placement of the child. The amount that the appropriate state agency requests the child's family to contribute shall be 25 26 based on guidelines in the rules of the appropriate state agency governing 27 the determination of contributions by parents and estates. This subsection 28 does not require parents to incur any costs for required special education 29 and related services or shall be construed to result in a reduction in 30 lifetime insurance benefits available for a child with a disability.

31 N. If appropriate services are offered by the school district and the 32 parent or the child chooses for the child to attend a private facility, either for day care or for twenty-four-hour care, neither the school district 33 nor the respective agency is obligated to assume the cost of the private 34 35 facility. If residential twenty-four-hour care is necessitated by factors 36 such as the child's home condition and is not related to the special 37 educational needs of the child, the agency responsible for the care of the 38 child is not required to pay any additional costs of room and board and 39 nonmedical expenses pursuant to this section.

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Sec. 4. Section 15-1181, Arizona Revised Statutes, is amended to read: 15-1181. <u>Definitions</u>

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In this article, unless the context otherwise requires:

43 1. "Child" means a person who is at least three years of age by
 44 September 1 of the current year but who is under twenty-two years of age.

45 2. "Foster parent" means a person who may serve as the parent of a
46 child with disabilities if that person has an ongoing, long-term parental
47 relationship with the child, is willing to make educational decisions for the

child and has no personal interest that would conflict with the interests of 1 2 the child. 3 3. "Fund" means the special education fund. 4 4. "Home school district" has the same meaning prescribed in section 5 15-761. 5. "Individualized education program" has the same meaning prescribed 6 7 in section 15-761. 8 6. "Parent" means the natural or adoptive parent of a child, the legal 9 guardian of a child, a relative with whom a child resides and who is acting as the parent of that child or a surrogate parent who has been appointed for 10 a child pursuant to section 15-763.01. Parent does not mean this state if 11 12 the child is a ward of the state. 13 7. "Place" or "placement" means placement of a child in a private 14 residential facility for residential special education placement as defined 15 in section 15-761 or by a state placing agency for care, safety or treatment 16 reasons. 17 8. "Private residential facility" means a private facility that is 18 licensed by the department of economic security or department of health 19 services and to which one of the following also applies: 20 (a) For special education placements, the facility has been approved 21 by the division of special education pursuant to section 15-765 for the 22 purpose of providing special education and related services. 23 (b) For other than special education placements, the facility has been accredited by the north central association of colleges and secondary 24 25 schools, except that private facilities applying for initial approval as a private school are not required to receive accreditation until three years 26 27 after the date of initial approval as long as continual progress toward 28 accreditation is maintained. 29 9. "Related services" means related services as defined in section 30 15-761. "Residential special education placement" has the same meaning 31 10. 32 prescribed in section 15-761. "Special education" has the same meaning prescribed in section 33 11. 15-761. 34 35 12. "State placing agency" means the department of juvenile 36 corrections, the department of economic security, the department of child safety, the department of health services ARIZONA HEALTH CARE COST 37 CONTAINMENT SYSTEM or the administrative office of the court. 38 39 Sec. 5. Section 36-141, Arizona Revised Statutes, is amended to read: 40 36-141. Authority to contract and pay for alcohol and drug abuse services: services to pregnant women: priority 41 A. The deputy director of the division of behavioral health with the 42 43 approval of the director ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM 44 ADMINISTRATION is authorized to contract for the development and maintenance 45 of alcohol and drug abuse services from monies available for such purpose 46 with public or private agencies or organizations engaged in providing such 47 preventive, rehabilitative and research services including educational, 48 counseling and research activities directed toward preventing persons from

becoming addicted to the excessive use of alcohol or other drugs and consultative services to relatives or other persons concerned with the care of persons addicted to the excessive use of alcohol or other drugs, in addition to detecting, counseling, referring, caring for and training those afflicted.

B. In allocating any new and existing undedicated monies available to the division of behavioral health ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM for alcohol and substance abuse, the deputy director OF THE ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM ADMINISTRATION shall give priority to treatment services for pregnant abusers of alcohol and other drugs.

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> Sec. 6. Section 36-189, Arizona Revised Statutes, is amended to read: 36-189. <u>State participation in establishment and maintenance of</u>

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local health departments and local health services

14 A. The department of health services may use funds MONIES at its 15 disposal and not otherwise appropriated to match funds MONIES provided by cities and counties to establish and maintain local health department 16 17 services for any city or county, on such reasonable terms as it establishes 18 From the appropriation made for purposes of this section, the by rule. 19 department of health services shall reimburse local health departments, which 20 meet minimum standards of personnel and performance established by the director of the department of health services and, upon ON submission and 21 22 approval of a plan and budget by such local health departments, fifty per 23 cent PERCENT of the portion of the total approved budget not in excess of one dollar twenty-five cents per capita or a prorated portion thereof if 24 sufficient funds MONIES are not available to meet the approved requests. If 25 annual expenditures of the local health department are less than the amount 26 27 budgeted, the total state reimbursement to such department for the year shall 28 not exceed the appropriate per cent PERCENTAGE of the amount actually 29 expended by such local health department. The department of health services may, in addition, MAY provide federal funds MONIES or services for 30 31 demonstrations, studies and special projects, or for emergencies.

32 B. The division of behavioral health in the department of health services ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM may use funds MONIES at 33 34 its disposal, including federal funds MONIES available to the state for this purpose, and not otherwise appropriated to contract for the establishment and 35 maintenance of local mental health facilities and services to be provided by 36 either private or public agencies. Funds MONIES available for this purpose 37 shall be expended only for local mental health facilities and services. The 38 39 division of behavioral health in the department of health services ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM ADMINISTRATION shall advance or reimburse 40 funds MONIES to local agencies that have submitted and obtained approval of 41 42 an annual plan and budget. The annual amount of state matching funds 43 provided shall not exceed seventy-five per cent PERCENT of the total annual 44 amount of funds MONIES and value of in-kind resources used by the agency to 45 establish and maintain local mental health facilities and services.

- Sec. 7. Section 36-201, Arizona Revised Statutes, is amended to read: 36-201. <u>Definitions</u>
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In this article, unless the context otherwise requires:

1 1. "Chief medical officer" means the chief medical officer of the 2 state hospital. 3 2. "Department" means the department of health services. 3. "Deputy director" means the deputy director of the division of 4 5 behavioral health in the department. 6 4. 3. "Director" means the director of the department of health 7 services. 5. "Division" means the division of behavioral health in the 8 9 department of health services. "Employee" means an officer or employee of the state hospital. 10 6. 4. 11 7. 5. "State hospital" means Arizona state hospital. 12 8. 6. "Superintendent" means the superintendent of the state 13 hospital. 14 Sec. 8. Section 36-202, Arizona Revised Statutes, is amended to read: 15 36-202. State hospital for the mentally disordered; official 16 name: purpose: facilities and equipment A. A state hospital shall be maintained for the care and treatment of 17 18 persons with mental disorders, and persons with other personality disorders 19 or emotional conditions who will benefit from care and treatment. Admissions 20 to the state hospital shall be in accordance with law. The hospital shall be 21 called the Arizona state hospital. 22 B. Subject to legislative appropriation, the state hospital may 23 provide services to persons suffering from alcoholism and to persons suffering from drug abuse. 24 25 C. The state hospital shall have adequate facilities and equipment for 26 enlightened and scientific treatment of nervous and mental diseases in 27 accordance with approved methods of mental therapeutics. Such THE facilities 28 shall include, among other things: 29 Facilities for medical and psychiatric treatment with special 1. 30 attention to occupational therapy and other special therapies. 31 2. Facilities for proper segregation and care of child patients. 32 3. Facilities for recreation and physical training. 4. An institutional library for the use of patients. 33 5. A properly equipped dental department. 34 35 6. A properly equipped laboratory and X-ray department. 36 7. A patient tracking system approved by the deputy director which 37 THAT monitors individual progress on an inpatient basis and assures ENSURES 38 suitable aftercare placement. D. The state hospital shall be under the charge and control of the 39 deputy director of the division of behavioral health of the department of 40 health services, pursuant to the provisions of this article and chapter 34 of 41 42 this title.

Sec. 9. Section 36-203, Arizona Revised Statutes, is amended to read: 36-203. <u>Persons with intellectual disabilities assigned to</u> <u>state hospital; department duties</u>

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8 9 A. The division DEPARTMENT OF HEALTH SERVICES shall develop and provide, in coordination with the department of economic security, specialized treatment programs for persons with an intellectual disability who have been admitted to the state hospital. The division DEPARTMENT OF HEALTH SERVICES may contract with the department of economic security in providing these programs.

B. The division DEPARTMENT, to the extent practicable, shall provide separate areas at the state hospital for persons diagnosed with intellectual disabilities and, to the extent practicable, shall provide that treatment programs developed pursuant to subsection A of this section are separate from treatment programs for other patients and for separate use of facilities by persons diagnosed with intellectual disabilities.

16 C. The division DEPARTMENT OF HEALTH SERVICES, on request of a parent 17 or guardian of a minor with an intellectual disability or the guardian of an 18 adult with an intellectual disability or on the request of an adult with an 19 intellectual disability, shall notify the department of economic security 20 before the release of that person from the state hospital and request that 21 the department of economic security provide placement evaluation and case management services for that person. The evaluation shall consider the 22 23 person's needs for housing, day programs, employment training, employment and 24 support services.

D. The division DEPARTMENT, on the application of a parent or guardian of a minor with an intellectual disability or the guardian of an adult with an intellectual disability or on the request of an adult with an intellectual disability, when the person has been authorized for discharge from the state hospital, may provide interim care and custody for that person pending the availability of intellectual disability programs and services in accordance with section 36-556.

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Sec. 10. Section 36-204, Arizona Revised Statutes, is amended to read: 36-204. <u>Duties of director</u>

The deputy director shall:

1. Adopt rules for inpatient services, with the approval of the director, which assure THAT ENSURE proper review of treatment and discharge plans, arrangement for aftercare placements, transfer of medical records and assistance with medications.

If deemed advisable, establish a nurses' training school in
 connection with the state hospital, which shall be under the supervision of
 the superintendent.

42 3. Prescribe forms of complaints, certificates of mental illness, and
43 commitments.

44 4. Adopt rules, with the approval of the director, for THE commitment 45 of mentally ill persons THAT ARE not inconsistent with provisions of law.

46 5. Adopt rules, with the approval of the director, for THE 47 administration of the state hospital and to carry out the purposes of this 48 article. Sec. 11. Section 36-205, Arizona Revised Statutes, is amended to read: 36-205. <u>Superintendent of state hospital; appointment;</u> <u>qualifications; compensation; chief medical officer</u> A. There shall be a superintendent of the state hospital who shall be appointed by the deputy director, with final approval of the director, and be under the supervision of the deputy director.

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B. The compensation to be paid to the superintendent shall be determined pursuant to section 38-611.

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C. The superintendent shall be removed only for cause.D. The superintendent shall have the following qualifications:

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1. Administrative experience in the private sector.

2. An educational background that prepares the superintendent for the administrative responsibilities assigned to the position.

143. Mental health-related experience in both an institutional and15community setting.

16 E. The superintendent, with the approval of the deputy director, shall appoint a chief medical officer of the state hospital who is a physician and 17 18 who is licensed pursuant to title 32, chapter 13 or 17. The chief medical officer shall have not less than three years' experience in the treatment of 19 20 psychiatric disorders and shall be board-certified in psychiatry by the board of psychiatry and neurology. The chief medical officer is eligible for 21 compensation pursuant to section 38-611. The chief medical officer is 22 23 responsible for the clinical administration of the hospital and shall report 24 directly to the superintendent.

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Sec. 12. Section 36-206, Arizona Revised Statutes, is amended to read: 36-206. <u>Duties of superintendent; clinical assessment</u>

27 A. The deputy director has charge of the state hospital and the 28 superintendent shall supervise and direct its activities, subject to the 29 provisions of law and approval of the deputy director. The superintendent is directly responsible to the deputy director for carrying out the purposes for 30 31 which the hospital is maintained. Subject to the approval of the deputy director, the superintendent may deputize any qualified officer of the state 32 hospital to do or perform any act the superintendent is empowered to do or 33 34 charged with the responsibility of doing by law.

B. The deputy director SUPERINTENDENT in December each year shall estimate the probable daily per capita cost of treatment and maintenance of each category of patients for the next ensuing year as determined in accordance with standard accounting practices. A statement of the estimate shall be provided to the director in January of the following year.

40 C. The superintendent, on request, shall provide to the deputy 41 director a clinical assessment of the state hospital's programs.

D. On or before August 1 of each year, the deputy director shall establish maximum funded capacity and a percentage allocation formula for forensic and civil bed capacity at the Arizona state hospital based on census data collected pursuant to sections 13-3994, 13-4512, 36-202.01 and 36-503.03. By June 1 of each year, the deputy director shall solicit and consider the recommendations of representatives of the county board of supervisors, the Arizona prosecuting attorneys' advisory council and the

1 superior court when establishing this formula. In addition to establishing 2 the formula, the deputy director, the county board of supervisors, the Arizona prosecuting attorneys' advisory council and the superior court shall 3 develop a contingency plan for the placement of patients subject to sections 4 5 13-3994, 13-4512, 36-202.01 and 36-503.03 in times of emergency and other 6 unforeseen circumstances. The deputy director shall notify the governor, the 7 president of the senate, the speaker of the house of representatives and the chairman of each county board of supervisors of the funded capacity and 8 9 allocation formula for the current fiscal year. Thirty days before the notification of the forensic and civil bed funded capacity formula, the 10 11 deputy director shall provide this information to the representatives of the 12 county board of supervisors, the Arizona prosecuting attorneys' advisory 13 council and the superior court for comment. The deputy director shall 14 include these comments when issuing the formula.

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27 28 Sec. 13. Section 36-208, Arizona Revised Statutes, is amended to read: 36-208. <u>Employees: compensation</u>

A. Except as otherwise provided by this article, the deputy director shall employ all employees of the state hospital. The deputy director may employ necessary medical consultants upon ON recommendation of the superintendent. The deputy director may permit members of the medical staff to act as consultants in psychiatry.

B. Subject to the laws of this state governing state personnel administration, the superintendent may discharge an employee for cause. An employee so discharged may, upon ON request, MAY have the reasons for his THE discharge reviewed and determined by the deputy director. The superintendent shall file a written report with the deputy director of each discharge setting forth the reasons therefor FOR THE DISCHARGE.

C. The compensation of employees of the state hospital shall be as determined pursuant to section 38–611.

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Sec. 14. Section 36-209, Arizona Revised Statutes, is amended to read: 36-209. Reports by superintendent and director

A. At such time as the <mark>deputy</mark> director designates, the superintendent shall submit to the deputy director a report of the activities of the state hospital during the preceding fiscal year, including:

The number of patients received, conditionally discharged and
 discharged and voluntary patients treated.

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2. Methods of treatment used and the results.

3. The total number, including the number of such persons who were committed on a voluntary and involuntary basis, of seriously mentally ill patients as defined in section 36-550 and the place to which each person was discharged.

4. Census data for treatment programs pursuant to sections 13-3994,
43 13-4512, 36-202.01 and 36-503.03.

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5. A complete employment and personnel record.

- 6. The condition of existing equipment.
- 7. Recommendations for improvement of the institution.

8. Other matters required by the deputy director or deemed advisable 1 2 by the superintendent to present a complete description of the condition and 3 activities of the hospital. 4 B. Not later than the fifteenth day of each month, the deputy director 5 shall prepare in duplicate a financial statement of the affairs of the state 6 hospital, including: 7 1. The amounts appropriated for the current fiscal year for operation, 8 maintenance and improvement. 9 2. The amount expended during the preceding calendar month. 10 3. The balance on hand. 4. The estimated expenditures for the current month. 11 12 5. An inventory report. 13 C. The original report and statements required by this section shall 14 be filed with and retained as records of the deputy director and duplicates 15 filed with the director of the department of administration. 16 D. At such time as the deputy director designates, the superintendent 17 shall submit to the deputy director a financial statement of the affairs of 18 the state hospital during the preceding fiscal year in a form prescribed by 19 the director of the department of administration. 20 E. By October 1 of each year, the deputy director, with the approval 21 of the director, shall submit to the governor a comprehensive report of the 22 activities of the state hospital during the preceding fiscal year, which 23 shall include the annual reports of the superintendent, and shall contain: 24 1. An account of the work done. 25 2. Recommendations for improvements. 3. Financial statements which shall THAT clearly reflect the origin 26 and disposition of all monies which THAT have come into the hands of the 27 28 deputy director or an employee through appropriations or otherwise. 29 F. The deputy director, with the approval of the director, shall make 30 such supplemental reports as the governor or the legislature requests. G. The annual report PRESCRIBED BY SUBSECTION E OF THIS SECTION shall 31 be published for the information of the public and five copies shall be 32 delivered to the chief clerk of the house of representatives and the 33 34 secretary of the senate, respectively, who shall keep them on file for the use of the members of each house. 35 Sec. 15. Section 36-210, Arizona Revised Statutes, is amended to read: 36 37 36-210. Expenditures A. This article does not give the director or any employee authority 38 39 to create a debt or obligation in excess of the amount appropriated by the 40 legislature to carry out its provisions. If monies are not appropriated to carry out the purpose of this article, the director shall submit 41 42 recommendations to the legislature, with a statement of the cost when an 43 improvement is requested.

B. Except as provided by subsection D of this section, the director of the department of administration shall not issue a warrant for expenditures by the state hospital in excess of the estimate contained in the monthly financial statement unless the superintendent submits a written request that is approved in writing by the deputy director OF THE DEPARTMENT OF HEALTH SERVICES and that states the reasons for the request. The director of the
 department of administration shall not issue warrants in excess of the amount
 available for the current quarter.

C. If a patient in the state hospital requires a health care service that the state hospital or a facility or provider contracted by the state hospital cannot provide, the department of health services shall pay approved claims from a facility or provider that provides these required services as follows:

 For inpatient and outpatient hospital services, the state shall reimburse at a level that does not exceed the reimbursement methodology established in section 36-2903.01, subsection G.

12 2. For health and medical services, the state shall reimburse 13 providers at a level that does not exceed the capped fee-for-service schedule 14 that is adopted by the Arizona health care cost containment system 15 administration pursuant to chapter 29, article 1 of this title and that is in 16 effect at the time the service is delivered.

D. Monies appropriated for capital investment may be expended at any time during the fiscal period for which the monies are appropriated as directed by the director.

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21 22 Sec. 16. Section 36-212, Arizona Revised Statutes, is amended to read: 36-212. <u>Maximum security area required</u>

The superintendent, under the direction of the deputy director, shall equip, staff and supervise the operation of an area consisting of one or more separate buildings on the state hospital grounds in Phoenix to be designated a maximum security area. The superintendent shall designate which patients shall be confined within a maximum security area, . Such area WHICH shall be equipped, staffed and maintained in order to provide treatment and necessary supervision to prevent the patients from leaving such THE area without authorization.

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Sec. 17. Section 36-213, Arizona Revised Statutes, is amended to read: 36-213. <u>Store and canteen; deposit</u>

A. The superintendent, with the approval of the deputy director, may set aside and designate any space on the grounds of the hospital that is not needed for other authorized purposes for the establishment and maintenance of store and canteen facilities for the sale of candies, cigarettes, food, nonalcoholic beverages, sundries and other articles to patients and employees and for the benefit of patients of the state hospital.

38 B. The superintendent, with the approval of the deputy director, may 39 contract with an outside firm, individual or agency to lease and operate the 40 store and canteen facilities. Such THE outside firm, individual or agency shall provide a bond in an amount set by the superintendent with the approval 41 of the deputy director. The facilities shall be conducted subject to the 42 43 rules and regulations of the division DEPARTMENT, and rental and service 44 charges shall be established by the superintendent, with the approval of the 45 deputy director, as will reimburse the hospital for the cost thereof.

46 C. Any profits derived from the operation of such facilities, after 47 reimbursement to the hospital, shall be deposited in the department of health 48 services donations fund created by authority of section 36-132, subsection B. The monies may be expended as the deputy director directs for the benefit
 of the patients of the state hospital. The provisions of title 35, chapter 1
 do not apply to the monies in the fund.

Sec. 18. Title 36, chapter 2, article 1, Arizona Revised Statutes, is amended by adding sections 36-216 and 36-217, to read:

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36-216. <u>Budget for state hospital</u>

A. THE DEPARTMENT SHALL PRESENT A BUDGET REQUEST THAT INCLUDES ALL INFORMATION ON THE POTENTIAL AVAILABILITY OF OTHER MONIES, INCLUDING FEDERAL MONIES, THAT MAY BE USED IN THE FOLLOWING FISCAL YEAR TO FUND THE STATE HOSPITAL.

11B. THE BUDGET REQUEST PRESENTED PURSUANT TO SUBSECTION A OF THIS12SECTION SHALL INCLUDE A PROPOSED BUDGET FOR THE STATE HOSPITAL, WITH A13SPECIFIC AMOUNT OF THE TOTAL BUDGET ESTIMATED TO BE USED FOR PATIENTS WHO ARE14SERIOUSLY MENTALLY ILL.

15 C. MONIES APPROPRIATED TO THE DEPARTMENT FOR THE STATE HOSPITAL 16 PROGRAMS, FEES GENERATED BY THE DEPARTMENT FOR THESE PROGRAMS AND GRANTS AND 17 GIFTS TO THE DEPARTMENT SHALL BE MAINTAINED IN THE APPROPRIATE FUND TO PAY 18 PROGRAM AND ADMINISTRATIVE COSTS. THE ADMINISTRATIVE COSTS OF EACH PROGRAM 19 SHALL BE SEPARATELY IDENTIFIED IN THE ACCOUNTING RECORDS OF THE DEPARTMENT.

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25 26 36-217. <u>State hospital annual report</u>

ON OR BEFORE JANUARY 1 OF EACH YEAR, THE DIRECTOR SHALL SUBMIT TO THE GOVERNOR, THE SPEAKER OF THE HOUSE OF REPRESENTATIVES AND THE PRESIDENT OF THE SENATE A FINANCIAL AND PROGRAMMATIC REPORT ON THE STATE HOSPITAL FOR THE PRECEDING FISCAL YEAR. THIS REPORT SHALL INCLUDE ALL REVENUES AND EXPENDITURES OF THE STATE HOSPITAL, INCLUDING SPECIFIC IDENTIFICATION OF ADMINISTRATIVE COSTS FOR AND THE NUMBER OF PERSONS SERVED AT THE STATE HOSPITAL.

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Sec. 19. Section 36-501, Arizona Revised Statutes, is amended to read: 36-501. <u>Definitions</u>

In this chapter, unless the context otherwise requires:

1. "ADMINISTRATION" MEANS THE ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM ADMINISTRATION.

1. 2. "Admitting officer" means a psychiatrist or other physician or psychiatric and mental health nurse practitioner with experience in performing psychiatric examinations who has been designated as an admitting officer of the evaluation agency by the person in charge of the evaluation agency.

2. 3. "Chief medical officer" means the chief medical officer under the supervision of the superintendent of the state hospital.

3. 4. "Contraindicated" means that access is reasonably likely to endanger the life or physical safety of the patient or another person.

42 4. 5. "Court" means the superior court in the county in this state in
43 which the patient resides or was found before screening or emergency
44 admission under this title.

45 5. 6. "Danger to others" means that the judgment of a person who has 46 a mental disorder is so impaired that the person is unable to understand the 47 person's need for treatment and as a result of the person's mental disorder the person's continued behavior can reasonably be expected, on the basis of
 competent medical opinion, to result in serious physical harm.

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26 27 (a) Means behavior that, as a result of a mental disorder:

(i) Constitutes a danger of inflicting serious physical harm on oneself, including attempted suicide or the serious threat thereof, if the threat is such that, when considered in the light of its context and in light of the individual's previous acts, it is substantially supportive of an expectation that the threat will be carried out.

(ii) Without hospitalization will result in serious physical harm or serious illness to the person.

(b) Does not include behavior that establishes only the condition of persons with HAVING A grave disabilities DISABILITY.

7. 8. "Department" means the department of health services.

8. "Deputy director" means the deputy director of the division of behavioral health in the department of health services.

9. "Detention" means the taking into custody of a patient or proposed patient.

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10. "Director" means the director of the department ADMINISTRATION.

11. "Division" means the division of behavioral health in the

department.

12. 11. "Evaluation" means:

6. 7. "Danger to self":

(a) A professional multidisciplinary analysis that may include firsthand observations or remote observations by interactive audiovisual media and that is based on data describing the person's identity, biography and medical, psychological and social conditions carried out by a group of persons consisting of not less than the following:

28 (i) Two licensed physicians, who shall be qualified psychiatrists, if 29 possible, or at least experienced in psychiatric matters, and who shall 30 examine and report their findings independently. The person against whom a petition has been filed shall be notified that the person may select one of 31 the physicians. A psychiatric resident in a training program approved by the 32 American medical association or by the American osteopathic association may 33 examine the person in place of one of the psychiatrists if the resident is 34 supervised in the examination and preparation of the affidavit and testimony 35 in court by a qualified psychiatrist appointed to assist in the resident's 36 training, and if the supervising psychiatrist is available for discussion 37 with the attorneys for all parties and for court appearance and testimony if 38 39 requested by the court or any of the attorneys.

40 (ii) Two other individuals, one of whom, if available, shall be a 41 psychologist and in any event a social worker familiar with mental health and 42 human services that may be available placement alternatives appropriate for 43 treatment. An evaluation may be conducted on an inpatient basis, an 44 outpatient basis or a combination of both, and every reasonable attempt shall 45 be made to conduct the evaluation in any language preferred by the person.

46 (b) A physical examination that is consistent with the existing
47 standards of care and that is performed by one of the evaluating physicians
48 or by or under the supervision of a physician who is licensed pursuant to

1 title 32, chapter 13 or 17 or a registered nurse practitioner who is licensed 2 pursuant to title 32, chapter 15 if the results of that examination are 3 reviewed or augmented by one of the evaluating physicians.

13. 12. "Evaluation agency" means a health care agency that is licensed by the department and that has been approved pursuant to this title, providing those services required of such agency by this chapter.

14. 13. "Family member" means a spouse, parent, adult child, adult sibling or other blood relative of a person undergoing treatment or evaluation pursuant to this chapter.

14. "GRAVE DISABILITY" MEANS A CONDITION EVIDENCED BY BEHAVIOR IN WHICH A PERSON, AS A RESULT OF A MENTAL DISORDER, IS LIKELY TO COME TO SERIOUS PHYSICAL HARM OR SERIOUS ILLNESS BECAUSE THE PERSON IS UNABLE TO PROVIDE FOR THE PERSON'S OWN BASIC PHYSICAL NEEDS.

14 15. "Health care decision maker" has the same meaning prescribed in 15 section 12-2801.

16 16. "Health care entity" means a health care provider, the department, 17 the Arizona health care cost containment system administration or a regional 18 behavioral health authority under contract with the department 19 ADMINISTRATION.

17. "Health care provider" means a health care institution as defined in section 36-401 that is licensed as a behavioral health provider pursuant to department rules or a mental health provider.

18. "Independent evaluator" means a licensed physician, psychiatric and mental health nurse practitioner or psychologist selected by the person to be evaluated or by such person's attorney.

19. "Informed consent" means a voluntary decision following
 presentation of all facts necessary to form the basis of an intelligent
 consent by the patient or guardian with no minimizing of known dangers of any
 procedures.

20. "Least restrictive treatment alternative" means the treatment plan and setting that infringe in the least possible degree with the patient's right to liberty and that are consistent with providing needed treatment in a safe and humane manner.

34 21. "Licensed physician" means any medical doctor or doctor of 35 osteopathy who is either:

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(a) Licensed in this state.

(b) A full-time hospital physician licensed in another state and
 serving on the staff of a hospital operated or licensed by the United States
 government.

40 22. "Medical director of an evaluation agency" means a psychiatrist, 41 or other licensed physician experienced in psychiatric matters, who is 42 designated in writing by the governing body of the agency as the person in 43 charge of the medical services of the agency for the purposes of this chapter 44 and may include the chief medical officer of the state hospital.

45 23. "Medical director of a mental health treatment agency" means a
46 psychiatrist, or other licensed physician experienced in psychiatric matters,
47 who is designated in writing by the governing body of the agency as the

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person in charge of the medical services of the agency for the purposes of
 this chapter and includes the chief medical officer of the state hospital.

24. "Mental disorder" means a substantial disorder of the person's
 emotional processes, thought, cognition or memory. Mental disorder is
 distinguished from:

6 (a) Conditions that are primarily those of drug abuse, alcoholism or 7 intellectual disability, unless, in addition to one or more of these 8 conditions, the person has a mental disorder.

9 (b) The declining mental abilities that directly accompany impending 10 death.

(c) Character and personality disorders characterized by lifelong and deeply ingrained antisocial behavior patterns, including sexual behaviors that are abnormal and prohibited by statute unless the behavior results from a mental disorder.

15 25. "Mental health provider" means any physician or provider of mental
 16 health or behavioral health services involved in evaluating, caring for,
 17 treating or rehabilitating a patient.

18 26. "Mental health treatment agency" means the state hospital or a
19 health care agency that is licensed by the department and that provides those
20 services that are required of the agency by this chapter.

27. "Outpatient treatment" or "combined inpatient and outpatient
 treatment" means any treatment program not requiring continuous inpatient
 hospitalization.

28. "Outpatient treatment plan" means a treatment plan that does not require continuous inpatient hospitalization.

29. "Patient" means any person undergoing examination, evaluation or behavioral or mental health treatment under this chapter.

30. "Peace officers" means sheriffs of counties, constables, marshals and policemen of cities and towns.

31. "Persistent or acute disability" means a severe mental disorder that meets all the following criteria:

(a) If not treated has a substantial probability of causing the person
 to suffer or continue to suffer severe and abnormal mental, emotional or
 physical harm that significantly impairs judgment, reason, behavior or
 capacity to recognize reality.

36 (b) Substantially impairs the person's capacity to make an informed 37 decision regarding treatment, and this impairment causes the person to be 38 incapable of understanding and expressing an understanding of the advantages 39 and disadvantages of accepting treatment and understanding and expressing an 40 understanding of the alternatives to the particular treatment offered after 41 the advantages, disadvantages and alternatives are explained to that person.

42 (c) Has a reasonable prospect of being treatable by outpatient,
 43 inpatient or combined inpatient and outpatient treatment.

44 32. "Persons with grave disabilities" means a condition evidenced by
45 behavior in which a person, as a result of a mental disorder, is likely to
46 come to serious physical harm or serious illness because the person is unable
47 to provide for the person's own basic physical needs.

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1 33. 32. "Prepetition screening" means the review of each application 2 requesting court-ordered evaluation, including an investigation of facts 3 alleged in such application, an interview with each applicant and an 4 interview, if possible, with the proposed patient. The purpose of the 5 interview with the proposed patient is to assess the problem, explain the 6 application and, when indicated, attempt to persuade the proposed patient to 7 receive, on a voluntary basis, evaluation or other services.

8 34. 33. "Prescribed form" means a form established by a court or the 9 rules of the division that have been approved by the director or 10 ADMINISTRATION in accordance with the laws of this state.

11 35. 34. "Professional" means a physician who is licensed pursuant to 12 title 32, chapter 13 or 17, a psychologist who is licensed pursuant to title 13 32, chapter 19.1 or a psychiatric and mental health nurse practitioner who is 14 certified pursuant to title 32, chapter 15.

15 36. 35. "Proposed patient" means a person for whom an application for
 evaluation has been made or a petition for court-ordered evaluation has been
 filed.

18 37. 36. "Psychiatric and mental health nurse practitioner" means a 19 registered nurse practitioner as defined in section 32-1601 who has completed 20 an adult or family psychiatric and mental health nurse practitioner program 21 and who is certified as an adult or family psychiatric and mental health 22 nurse practitioner by the state board of nursing.

38. 37. "Psychiatrist" means a licensed physician who has completed three years of graduate training in psychiatry in a program approved by the American medical association or the American osteopathic association.

39. 38. "Psychologist" means a person who is licensed under title 32, chapter 19.1 and who is experienced in the practice of clinical psychology.

40. 39. "Records" means all communications that are recorded in any form or medium and that relate to patient examination, evaluation or behavioral or mental health treatment. Records include medical records that are prepared by a health care provider or other providers. Records do not include:

(a) Materials that are prepared in connection with utilization review,
 peer review or quality assurance activities, including records that a health
 care provider prepares pursuant to section 36-441, 36-445, 36-2402 or
 36-2917.

(b) Recorded telephone and radio calls to and from a publicly operated
 emergency dispatch office relating to requests for emergency services or
 reports of suspected criminal activity.

40 41. 40. "Screening agency" means a health care agency that is 41 licensed by the department and that provides those services required of such 42 agency by this chapter.

43 42. 41. "Social worker" means a person who has completed two years of
 44 graduate training in social work in a program approved by the council of
 45 social work education and who has experience in mental health.

43. 42. "State hospital" means the Arizona state hospital.

47 44. 43. "Superintendent" means the superintendent of the state
48 hospital.

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A. The deputy director, with the approval of the director, shall make rules including THAT INCLUDE standards for agencies OTHER THAN THE STATE HOSPITAL WHEN providing services, and prescribing SHALL PRESCRIBE forms as may be necessary, for the proper administration and enforcement of this chapter. The rules shall be applicable to patients admitted to or treated in agencies, OTHER THAN THE STATE HOSPITAL, as set forth in this chapter and shall provide for periodic inspections of such agencies.

B. The deputy director, with the approval of the director, shall make rules concerning THE admission of patients and the transfer of patients between mental health treatment agencies OTHER THAN THE STATE HOSPITAL. A patient undergoing court-ordered treatment may be transferred from one mental health treatment agency to another in accordance with the rules of the deputy director, subject to the approval of the court.

C. The deputy director, with the approval of the director, may make
 rules concerning leaves, visits and absences of patients from evaluation
 agencies and mental health treatment agencies OTHER THAN THE STATE HOSPITAL.

20 D. The total amount of state monies that may be spent in any fiscal 21 year by the department ADMINISTRATION for mental health services pursuant to this chapter shall MAY not exceed the amount appropriated or authorized by 22 23 section 35-173 for that purpose. This chapter shall DOES not be construed to impose a duty on an officer, agent or employee of this state to discharge a 24 responsibility or to create any right in a person or group if the discharge 25 or right would require an expenditure of state monies in excess of the 26 27 expenditure authorized by legislative appropriation for that specific 28 purpose.

Sec. 21. Title 36, chapter 5, article 1, Arizona Revised Statutes, is amended by adding section 36-502.01, to read:

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36-502.01. Powers and duties of director of the department of

health services: rules: expenditure limitation

A. THE DIRECTOR OF THE DEPARTMENT SHALL MAKE RULES THAT INCLUDE STANDARDS FOR THE STATE HOSPITAL WHEN PROVIDING SERVICES AS AN EVALUATION AGENCY OR MENTAL HEALTH AGENCY AND SHALL PRESCRIBE FORMS AS MAY BE NECESSARY FOR THE PROPER ADMINISTRATION AND ENFORCEMENT OF THOSE RESPONSIBILITIES. THE RULES SHALL BE APPLICABLE TO PATIENTS ADMITTED TO, EVALUATED BY OR TREATED IN THE STATE HOSPITAL AS SET FORTH IN THIS CHAPTER AND SHALL PROVIDE FOR PERIODIC INSPECTIONS OF THE STATE HOSPITAL.

B. THE DIRECTOR OF THE DEPARTMENT SHALL MAKE RULES CONCERNING THE
ADMISSION OF PATIENTS TO THE STATE HOSPITAL AND THE TRANSFER OF PATIENTS
BETWEEN THE STATE HOSPITAL AND OTHER MENTAL HEALTH TREATMENT AGENCIES. A
PATIENT UNDERGOING COURT-ORDERED TREATMENT MAY BE TRANSFERRED BETWEEN THE
STATE HOSPITAL AND ANOTHER MENTAL HEALTH TREATMENT AGENCY IN ACCORDANCE WITH
THE RULES OF THE DIRECTOR OF THE DEPARTMENT, SUBJECT TO THE APPROVAL OF THE
COURT.

47 C. THE DIRECTOR OF THE DEPARTMENT MAY MAKE RULES CONCERNING LEAVES,
48 VISITS AND ABSENCES OF PATIENTS FROM THE STATE HOSPITAL.

D. THE TOTAL AMOUNT OF STATE MONIES THAT MAY BE SPENT IN ANY FISCAL YEAR BY THE DEPARTMENT FOR MENTAL HEALTH SERVICES PURSUANT TO THIS CHAPTER MAY NOT EXCEED THE AMOUNT APPROPRIATED OR AUTHORIZED BY SECTION 35-173 FOR THAT PURPOSE. THIS CHAPTER DOES NOT IMPOSE A DUTY ON AN OFFICER, AGENT OR EMPLOYEE OF THIS STATE TO DISCHARGE A RESPONSIBILITY OR CREATE ANY RIGHT IN A PERSON OR GROUP IF THE DISCHARGE OR RIGHT WOULD REQUIRE AN EXPENDITURE OF STATE MONIES IN EXCESS OF THE EXPENDITURE AUTHORIZED BY LEGISLATIVE APPROPRIATION FOR THAT SPECIFIC PURPOSE.

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Sec. 22. <u>Repeal: transfer of monies</u>

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A. Section 36-503.02, Arizona Revised Statutes, is repealed.

B. All unexpended and unencumbered monies remaining in the serious mental illness services fund established by section 36-503.02, Arizona Revised Statutes, as repealed by subsection A of this section, are transferred to the state general fund on the effective date of this section.

Sec. 23. Section 36-504, Arizona Revised Statutes, is amended to read:

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36-504. Notice of patients' rights: notification to family

A. Every person undergoing treatment or evaluation pursuant to this 17 18 chapter is entitled to the rights set forth in this chapter and to rights 19 that the deputy director, with the approval of the director, specifies by rule. A list of patients' rights as required by this chapter and by the 20 21 division ADMINISTRATION shall be compiled and published by the deputy 22 director, with the approval of the director, by rule. The list shall be prominently posted in English and Spanish in all facilities providing 23 24 evaluation or treatment. A patient's rights shall otherwise be brought to 25 the attention of the patient as this chapter requires or the deputy 26 director, with the approval of the director, may direct by rule.

27 B. An agency which THAT is evaluating, examining or treating a person 28 pursuant to article 4 or 5 of this chapter shall immediately notify the 29 person's guardian or, if none, a member of the person's family that the 30 person is being treated in the agency. If the person has an agent appointed 31 pursuant to chapter 32 of this title, the agency shall notify that agent. If 32 the agency is unable to learn the identity of OR TO CONTACT the guardian or 33 a member of the person's family or is unable to contact them, it shall 34 document every attempt that was made to comply with such THE notification. 35 The agency shall release any further information only after the treating professional or that person's designee interviews the person undergoing 36 treatment or evaluation to determine whether or not release is in that 37 38 person's best interests. A decision to release or withhold information is subject to review pursuant to section 36-517.01. The treating agency shall 39 40 record the name of a person to whom any information is given.

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Sec. 24. Section 36-511, Arizona Revised Statutes, is amended to read: 36-511. <u>Quality of treatment</u>

A. Subject to his THE right to refuse psychiatric and medical treatment pursuant to sections 36-512 and 36-513 and pursuant to rules of the division ADMINISTRATION, every person undergoing evaluation or treatment pursuant to this chapter shall receive physical and psychiatric care and treatment, delivered in a manner that allows the person's family members or guardian to participate in his THE care and treatment when appropriate, for the full period he THE PERSON is detained. The agency providing care and treatment shall keep a clinical record for each person which THAT details all medical and psychiatric evaluations and all care and treatment received by the person.

B. An agency administering the care and treatment shall provide and make available to the guardian, if one exists, upon ON request:

1. A written treatment program based on the individual needs of the person.

2. Careful and periodic reexaminations of each person by appropriate professional persons, including a physician. Reexaminations shall be made once each ninety days, and the results shall be a part of the person's medical record.

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3. A full physical examination once a year.

4. Adequate medical treatment in the light of present medical knowledge in accordance with the results of these examinations.

C. An agency administering inpatient care and treatment, in conjunction with the community treatment agency, shall, prior to AND BEFORE the release of a patient, SHALL prepare a plan for the patient's care after release, including arrangements for a place to live, and an adequate program for necessary treatment and maintenance, and SHALL provide the plan to the patient's guardian if one exists. The community treatment agency shall make a good faith effort to initiate treatment with a patient released from an inpatient facility.

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Sec. 25. Section 36-518, Arizona Revised Statutes, is amended to read: 36-518. <u>Application for voluntary admission; admission to</u> agency; minors; transportation

A. Pursuant to rules of the division ADMINISTRATION, any person who is eighteen years of age or older and who manifests the capacity to give and gives informed consent may be hospitalized for evaluation, care and treatment by voluntarily making written application APPLYING IN WRITING on a prescribed form. The agency to which the person applies may accept and admit the person if the medical director of the agency or the admitting officer believes that the person needs evaluation or will benefit from care and treatment of a mental disorder or other personality disorder or emotional condition in the agency. Informed consent as defined in section 36-501 may be given by the person's guardian pursuant to section 14-5312.01 or agent appointed pursuant to chapter 32, article 6 of this title if that agent was granted the authority to do this by the mental health care power of attorney. If an agent gives informed consent as defined in section 36-501, an evaluation shall be conducted pursuant to section 36-3284.

B. Notwithstanding subsection C of this section, and except in the case of an emergency admission, a minor who is in the custody of the juvenile court, who is a ward of the juvenile court as a dependent child or who is adjudicated delinquent or incorrigible shall not be admitted for evaluation or treatment unless approved by the court on application filed by an entity as provided in section 8-272 or 8-273.

47 C. A minor may be admitted to a mental health agency as defined in 48 section 8-201 by the written application of the parent, guardian or custodian of the minor, or a person designated by the court if the parent, guardian or custodian is without monetary resources to file an application or could not be located after reasonable efforts and the minor is under the supervision of an adult probation department after the following has occurred:

5 1. A psychiatric investigation by the medical director of the mental 6 health agency that carefully probes the child's social, psychological and 7 developmental background.

8 2. An interview with the child by the medical director of the mental 9 health agency.

10 3. The medical director has explained to the child and the child's 11 parent, guardian or custodian or to the person designated by the court 12 pursuant to this subsection the program of evaluation or treatment 13 contemplated and its probable length.

4. The medical director has explored and considered available alternatives to inpatient treatment or evaluation.

5. The medical director of a mental health agency has determined whether the child needs an inpatient evaluation or will benefit from care and treatment of a mental disorder or other personality disorder or emotional condition in the agency and whether the evaluation or treatment goals can be accomplished in a less restrictive setting. A record of the reasons for this determination shall be made.

D. If the child's situation does not satisfy the requirements of subsection C of this section, the application by the parent, guardian or custodian shall be refused.

E. All emergency admissions for mental health evaluation or treatment
 of children shall be made pursuant to the standards and procedures in article
 4 of this chapter.

F. If a parent, guardian or custodian is unavailable after a reasonable effort has been made to locate the parent, guardian or custodian, the court shall appoint a guardian for the child pursuant to title 14, chapter 5.

32 G. The board of supervisors of the county of residence of a person who 33 has submitted an application for admission to the state hospital pursuant to 34 subsection A of this section shall provide transportation to the state hospital for the person if it appears that the person is eligible for 35 voluntary admission to the state hospital after consultation between the 36 state hospital and the evaluation or screening agency. The county is 37 responsible for that expense to the extent the expense is not covered by any 38 39 third-party payor.

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Sec. 26. Section 36-520, Arizona Revised Statutes, is amended to read: 36-520. <u>Application for evaluation: definition</u>

A. Any responsible individual may apply for a court-ordered evaluation of a person who is alleged to be, as a result of a mental disorder, a danger to self or to others, OR a person with a persistent or acute disability or a grave disability and who is unwilling or unable to undergo a voluntary evaluation. The application shall be made in the prescribed form and manner as adopted by the deputy director.

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B. The application for evaluation shall include the following data:

1. The name, and address if known, of the proposed patient for whom evaluation is applied.

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2. The age, date of birth, sex, race, marital status, occupation, social security number, present location, dates and places of previous hospitalizations, names and addresses of the guardian, spouse, next of kin and significant other persons and other data that the deputy director may require on the form to whatever extent that this data is known and is applicable to the proposed patient.

9 3. The name, address and relationship of the person who is applying 10 for the evaluation.

4. A statement that the proposed patient is believed to be, as a result of a mental disorder, a danger to self or to others, OR a patient with a persistent or acute disability or a grave disability and the facts on which this statement is based.

5. A statement that the applicant believes the proposed patient is in need of supervision, care and treatment and the facts on which this statement is based.

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C. The application shall be signed and notarized.

D. The screening agency shall offer assistance to the applicant in preparation of the application. Upon ON receipt of the application, the screening agency shall act as prescribed in section 36-521 within forty-eight hours of the filing of the application excluding weekends and holidays. If the application is not acted upon within forty-eight hours, the reasons for not acting promptly shall be reviewed by the director of the screening agency or the director's designee.

E. If the applicant for the court-ordered evaluation presents the person to be evaluated at the screening agency, the agency shall conduct a prepetition screening examination. Except in the case of an emergency evaluation, the person to be evaluated shall not be detained or forced to undergo prepetition screening against the person's will.

F. If the applicant for the court-ordered evaluation does not present the person to be evaluated at the screening agency, the agency shall conduct the prepetition screening at the home of the person to be evaluated or any other place the person to be evaluated is found. If prepetition screening is not possible, the screening agency shall proceed as in section 36-521, subsection B.

G. If a person is being treated by prayer or spiritual means alone in accordance with the tenets and practices of a recognized church or religious denomination by a duly accredited practitioner of that church or denomination, such person may not be ordered evaluated, detained or involuntarily treated unless the court has determined that the person is, as a result of mental disorder, a danger to others or to self.

H. Court-ordered evaluation or treatment pursuant to this chapter
 shall DOES not operate to change the legal residence of a patient.

I. If the application is not acted upon ON because it has been
determined that the proposed patient does not need an evaluation, the agency
after a period of six months shall destroy the application and any other
evidence of the application.

J. For the purposes of this section, "person" includes a person who:1. Is under eighteen years of age.

2. Has been transferred to the criminal division of the superior court pursuant to section 8-327 or who has been charged with an offense pursuant to section 13-501.

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3. Is under the supervision of an adult probation department.

Sec. 27. Section 36-521, Arizona Revised Statutes, is amended to read: 36-521. <u>Preparation of petition for court-ordered evaluation:</u>

procedures for prepetition screening

A. Upon ON receiving the application for evaluation, the screening agency, shall, prior to BEFORE filing a petition for court-ordered evaluation, SHALL provide prepetition screening within forty-eight hours excluding weekends and holidays when possible to determine whether there is reasonable cause to believe the allegations of the applicant for the court-ordered evaluation, whether the person will voluntarily receive evaluation at a scheduled time and place and whether he THE PERSON has a persistent or acute disability, OR a grave disability or IS likely to present a danger to self or others until the voluntary evaluation.

B. After prepetition screening has been completed, the screening agency shall prepare a report of opinions and conclusions. If prepetition screening is not possible, the screening agency shall prepare a report giving reasons why the screening was not possible and including opinions and conclusions of staff members who attempted to conduct prepetition screening or otherwise investigated the matter.

25 C. If the prepetition screening report indicates that there exists no 26 reasonable cause to believe the allegations of the applicant for the 27 court-ordered evaluation, it shall be reviewed by the medical director of the 28 screening agency or his THE MEDICAL DIRECTOR'S designee.

29 D. If, based upon ON the allegations of the applicant for the court-ordered evaluation and the prepetition screening report or other 30 31 information obtained while attempting to conduct a prepetition screening, the agency determines that there is reasonable cause to believe that the proposed 32 patient is, as a result of mental disorder, a danger to self or to others, 33 34 OR has a persistent or acute disability or a grave disability and that the proposed patient is unable or unwilling to voluntarily receive evaluation or 35 is likely to present a danger to self or to others, has a grave disability or 36 37 will further deteriorate before receiving a voluntary evaluation, it THE 38 AGENCY shall prepare a petition for court-ordered evaluation and shall file the petition, which shall be signed by the person who prepared the petition 39 40 unless the county attorney performs these functions. If the agency determines that there is reasonable cause to believe that the person is in 41 42 such a condition that without immediate hospitalization he is likely to harm 43 himself or others, it THE AGENCY shall take all reasonable steps to procure 44 such hospitalization on an emergency basis.

E. The agency may contact the county attorney in order to obtain his assistance in preparing the petition for court-ordered evaluation, and the agency may request the advice and judgment of the county attorney in reaching a decision as to whether the court-ordered evaluation is justified.

2 court has ordered the county attorney to prepare the petition. 3 G. If a petition for court-ordered evaluation alleges danger to others 4 as described in section 36-501, the screening agency, shall, prior to BEFORE 5 filing such A petition, SHALL contact the county attorney for a review of the petition. The county attorney shall examine the petition and make one of the 6 7 following written recommendations: 8 That a criminal investigation is warranted. 1. 9 2. That the screening agency shall file the petition. 3. That no further proceedings are warranted. The screening agency 10 shall consider such THE recommendation in determining whether a court-ordered 11 12 evaluation is justified and shall include such THE recommendation with the 13 petition if $\frac{1}{1}$ THE AGENCY decides to file the petition with the court. 14 H. The petition shall be made in the form and manner prescribed by the 15 deputy director. Sec. 28. Section 36-522, Arizona Revised Statutes, is amended to read: 16 17 36-522. Voluntary evaluation 18 A. If the petition for court-ordered evaluation is not filed because 19 it has been determined that the proposed patient will voluntarily receive an 20 evaluation and is unlikely to present a danger to self or others until the 21 voluntary evaluation, the evaluation agency provided for by the county, or 22 selected by the proposed patient, shall be immediately notified and shall 23 provide evaluation of the proposed patient at a scheduled time and place within five days of the notice. The voluntary evaluation may be on an 24 25 inpatient or outpatient basis. B. Voluntary inpatient evaluation is subject to the provisions of 26 27 article 3 of this chapter. 28 C. Voluntary outpatient evaluation shall conform to the requirements 29 of section 36-530, subsection D and section 36-531, subsections B, C and D 30 and shall proceed only after the person to be evaluated has given consent to 31 be evaluated by signing a form prescribed by the deputy director which THAT 32 includes information to the proposed patient that the patient-physician privilege does not apply and that the evaluation may result in a petition for 33 the person to undergo court-ordered treatment or for guardianship. Voluntary 34 evaluation may be carried out only if chosen by the patient during the course 35 of a prepetition screening after AN application for evaluation has been made. 36 Sec. 29. Section 36-523, Arizona Revised Statutes, is amended to read: 37 38 36-523. Petition for evaluation A. The petition for evaluation shall contain the following: 39 40 1. The name, address and interest in the case of the individual who 41 applied for the petition. 42

F. The county attorney may prepare or sign or file the petition if a

2. The name, and address if known, of the proposed patient for whom evaluation is petitioned.

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3. The present whereabouts of the proposed patient, if known.

4. A statement alleging that there is reasonable cause to believe that
the proposed patient has a mental disorder and is as a result a danger to
self or others, has a persistent or acute disability or a grave disability
and is unwilling or unable to undergo voluntary evaluation.

5. A summary of the facts which THAT support the allegations that the proposed patient is dangerous, has a persistent or acute disability or a grave disability and is unwilling or unable to be voluntarily evaluated, including the facts which THAT brought the proposed patient to the screening agency's attention.

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6. Other information that the deputy director, with the approval of the director, by rule or the court by rule or order may require.

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B. The petition shall request that the court issue an order requiring that the proposed patient be given an evaluation and shall advise the court of both of the following:

11 1. That the opinion of the petitioner is either that the proposed 12 patient is or is not in such a condition that without immediate or continuing 13 hospitalization he THE PATIENT is likely to suffer serious physical harm or 14 further deterioration or inflict serious physical harm upon ON another 15 person.

16 2. If the opinion of the petitioner is that the proposed patient is 17 not in the condition described in paragraph 1 of this subsection, that the 18 opinion of the petitioner is either that the evaluation should or should not 19 take place on an outpatient basis.

C. The petition for evaluation shall be accompanied by the application for evaluation, by the recommendation of the county attorney pursuant to section 36-521 and by a prepetition screening report, unless such THE documents have not been prepared under a provision of law or in accordance with an order of the court. The petition for evaluation shall also be accompanied by a copy of the application for emergency admission if one exists.

D. A petition and other forms required in a court may be filed only by
 the screening agency which THAT has prepared the petition.

E. If the petition is not filed because it has been determined that the person does not need an evaluation, the agency after a period of six months shall destroy the petition and the various reports annexed to the petition as required by this section.

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Sec. 30. Section 36-531, Arizona Revised Statutes, is amended to read: 36-531. <u>Evaluation: possible dispositions: release</u>

A. A person WHO IS being evaluated on an inpatient basis in an evaluation agency shall be released if, in the opinion of the medical director of the agency, further evaluation is not appropriate unless the person makes application APPLIES for further care and treatment on a voluntary basis.

40 B. If it is determined upon ON an evaluation of the patient's condition that he THE PATIENT is, as a result of a mental disorder, a danger 41 42 to self or to others, OR has a persistent or acute disability or a grave 43 disability, the medical director in charge of the agency which THAT provided 44 the evaluation shall, unless the person makes application APPLIES for further 45 care and treatment on a voluntary basis, SHALL prepare, sign and file a 46 petition for court-ordered treatment unless the county attorney performs the 47 functions of preparing, signing or filing the petition as provided in subsection C of this section. 48

C. The agency may contact the county attorney to obtain his assistance in preparing the petition for court-ordered treatment, and the agency may request the advice and judgment of the county attorney in reaching a decision as to whether court-ordered treatment is justified.

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10 11 D. A person being evaluated on an inpatient basis in an evaluation agency shall be released within seventy-two hours, excluding weekends and holidays, from the time that he THE PERSON is hospitalized pursuant to a court order for evaluation, unless the person makes application APPLIES for further care and treatment on a voluntary basis or unless a petition for court-ordered treatment has been filed pursuant to subsection B of this section.

12 E. The department of health services ADMINISTRATION may conduct 13 jointly with a school district, directly or indirectly, an educational 14 evaluation pursuant to sections 15-765 and 15-766 for nonadjudicated 15 youth. The evaluation information may be shared by and among authorized 16 personnel employed by the department of health services ADMINISTRATION and 17 the department of education, or authorized personnel from the local education 18 agency, for purposes of ensuring the provision of special education and related services as required by the individuals with disabilities education 19 20 act (20 United States Code sections 1400 through 1415).

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Sec. 31. Section 36-535, Arizona Revised Statutes, is amended to read: 36-535. <u>Detention of proposed patient; time of hearing;</u>

<u>released patient; intervention by department</u>

A. If, on the filing of a petition for court-ordered treatment, the patient is not then detained in an agency, the court shall order the detention of the patient in the agency that conducted the evaluation if the court determines that the patient is likely to present a danger to self or others before the conclusion of the hearing or is not likely to appear at the hearing on the petition if not detained. The court shall issue such orders as are necessary to provide for the apprehension, transportation and detention of the proposed patient. The court shall appoint counsel for the proposed patient if one has not been previously appointed.

B. The court shall order the hearing to be held within six business 33 days after the petition is filed, except that, on good cause shown, the court 34 35 may continue the hearing at the request of either party. The hearing may be 36 continued for a maximum of thirty days at the request of the proposed 37 patient. The hearing may be continued for a maximum of three business days 38 at the request of the petitioner. If the hearing is continued at the request of the petitioner and the proposed patient is involuntarily hospitalized, the 39 40 proposed patient may request a hearing to determine whether the proposed patient should be involuntarily hospitalized during the continuation period. 41

42 C. If after reviewing the petition with its attached material and 43 other evidence at hand the court finds that the patient is not, as a result 44 of mental disorder, a danger to self or others, a patient with OR DOES NOT 45 HAVE a persistent or acute disability or a grave disability, the patient 46 shall be released.

47 D. The division DEPARTMENT, acting on behalf of the state hospital, 48 THE ADMINISTRATION OR A REGIONAL BEHAVIORAL HEALTH AUTHORITY, may intervene

1 as a party to the proceedings on any petition for court-ordered treatment and 2 may appear as a party at the hearing on the petition by filing a written 3 notice of intervention with the clerk of the superior court in the county in 4 which the petition was filed, at any time before either the original time set 5 for the hearing or the time to which the hearing is continued. The 6 intervenor at the hearing may cross-examine any witnesses presented by other 7 parties pursuant to section 36-539, may subpoena and present witnesses of its 8 own, including physicians, and may present other evidence. The intervenor, 9 on stipulation with all other parties or on order of the court, may cause 10 physicians to personally conduct mental status examinations of the proposed patient and to testify as to their opinions concerning whether the proposed 11 12 patient is, as a result of mental disorder, a danger to self or to others, 13 OR has a persistent or acute disability or a grave disability and as to 14 whether the proposed patient requires treatment. This subsection applies in 15 addition to all rules of evidence, the Arizona rules of civil procedure and 16 section 36-539.

Sec. 32. Section 36-540.02, Arizona Revised Statutes, is amended to read:

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36-540.02. <u>Transfer of a person with a grave disability without</u> <u>a guardian from a mental health treatment agency</u> <u>to another health care facility</u>

A. A person who does not have a guardian under the provisions of section 14-5312.01 and who has been found by the court to be a person with HAVE a grave disability and ordered to undergo treatment pursuant to this article may receive care in another health care institution licensed by the department during the course of the person's court-ordered treatment in accordance with department ADMINISTRATION rules.

B. The deputy director, with the approval of the director, shall adopt rules pertaining to persons described in subsection A of this section to provide for their alternative care in another health care institution licensed by the department during the course of court-ordered treatment. The rules shall allow transfer of patients from a mental health treatment agency to another health care institution, transfer from one such institution to another and return to a mental health treatment agency.

35 Sec. 33. Section 36-541.01, Arizona Revised Statutes, is amended to 36 read:

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36-541.01. <u>Release or discharge from treatment before</u> <u>expiration of period ordered by court:</u> <u>notification of intent to release or discharge:</u> <u>hearing</u>

41 A. A patient WHO IS ordered to undergo treatment pursuant to this article may be released from treatment before the expiration of the period 42 43 ordered by the court if, in the opinion of the medical director of the mental 44 health treatment agency, the patient no longer is, as a result of a mental 45 disorder, a danger to others, OR a danger to self, OR NO LONGER has a 46 persistent or acute disability or a grave disability. A person WHO IS 47 ordered to undergo treatment as a danger to others may not be released or 48 discharged from treatment before the expiration of the period for treatment ordered by the court unless the medical director first gives notice of
 intention to do so as provided by this section.

B. Before the release or discharge of a patient WHO IS ordered to undergo treatment, the medical director of the mental health treatment agency shall notify the following of the medical director's intention to release or discharge the patient:

7 1. The presiding judge of the court that entered the order for8 treatment.

2. Any relative or victim of the patient who has filed a demand for notice with the treatment agency.

11 3. Any person found by the court to have a legitimate reason for 12 receiving notice.

C. If criminal charges against a patient involving death or serious physical injury or a violation of title 13, chapter 14 are dismissed pursuant to section 13-4517, the medical director shall notify the prosecuting agency if a civil commitment order issued pursuant to this chapter expires or is terminated, or if the patient is discharged to outpatient treatment. The medical director shall provide this notice by mail at least five days before the anticipated date of the expiration, termination or discharge.

D. If the director of the mental health treatment agency is unable to determine, based on the information submitted pursuant to subsection E OF THIS SECTION, that a person who has filed a demand for notice is a victim, the director shall inform that person that that person's demand for notice is denied and that notice will not be given unless ordered by the court pursuant to subsection F OF THIS SECTION.

E. A demand for notice by a relative or victim, and a petition for notice by other persons, shall be on a form prescribed by the department ADMINISTRATION and shall include the following information:

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1. The full name of the person to receive notice.

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2. The address to which notice is to be mailed.

3. The telephone number of the person to receive notice.

4. The relationship to the patient, if any, or the reasons why the person believes the person has a legitimate reason to receive notice.

5. A statement that the person will advise the treatment agency in writing by certified mail, return receipt requested, of any change in the address to which notice is to be mailed.

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 6. The full name of the patient ordered to undergo treatment as a
 38 danger to others.

397. The mental health number assigned to the case by the superior40 court.

41 F. If the court receives a demand for notice by a relative or victim, 42 the court shall order the medical director of the mental health treatment 43 agency not to release or discharge the patient before the expiration of the period of court-ordered treatment without first giving notice to the relative 44 or victim as provided in subsection G OF THIS SECTION. After considering a 45 petition for notice, if the court finds that the petitioner has a legitimate 46 47 reason for receiving prior notice, the court may order the medical director 48 of the mental health treatment agency not to release or discharge the patient from inpatient treatment before the expiration of the period of court-ordered treatment without first giving notice to the petitioner as provided in subsection G OF THIS SECTION. Any order for notice shall be delivered to the mental health treatment agency and shall be filed with the patient's clinical record. If the patient is transferred to another agency or institution, any orders for notice shall be transferred with the patient.

G. A notice of intention to release or discharge shall include the following information:

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- 1. The name of the patient to be released or discharged.
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- 2. The type of release or discharge.

3. The date of anticipated release or discharge. Notices shall be placed in the mail, postage prepaid and addressed to the court and to each person for whom notice has been ordered, at least ten days before the date of intended release or discharge, except THAT notice shall be sent to the prosecuting agency at least five days before the date of intended release or discharge. For purposes of computing the notice requirement, the day of mailing shall not be counted.

18 H. Any person for whom prior notice is required pursuant to this 19 section, or the court, may make a motion within the notification period that 20 requires the court to determine whether the standard for release of the 21 patient before the expiration of the period for court-ordered treatment has been met. A determination that the standard for release has been met may be 22 23 made by the court based on a review of the record and any affidavits 24 submitted without further hearing. For good cause, the court may order an evidentiary hearing. Whether or not a hearing is held, the court shall make 25 26 a determination at the earliest possible time but no longer than three weeks 27 after the anticipated date of release pursuant to subsection G OF THIS SECTION, and the patient shall be retained for the additional time required 28 29 for the court's determination. In making its determination the court may 30 order an independent examination of the patient. If a motion is not made, 31 the patient may be released in accordance with the terms set forth in the 32 notice without further court order.

I. If a motion has not been made pursuant to subsection H OF THIS 33 SECTION, the patient may be released or discharged and the medical director 34 35 of the mental health treatment agency shall send to the court a certificate that the patient is no longer a danger to others, OR a danger to self, OR36 37 NO LONGER has a persistent or acute disability or a grave disability as the 38 result of a mental disorder and therefore is released before the expiration of the period ordered for treatment. The court shall enter an order 39 terminating the patient's court-ordered treatment. 40

J. The medical director of the mental health treatment agency shall not be held civilly liable for any acts committed by a patient WHO IS released before the expiration of the period of court-ordered treatment if the medical director has in good faith followed the requirements of this section. Sec. 34. Section 36-543, Arizona Revised Statutes, is amended to read: 36-543. <u>Release from treatment of a patient with a grave</u> <u>disability or a persistent or acute disability:</u> <u>annual review; court order for continued treatment;</u> <u>rules</u>

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A. A patient WHO IS found to have a grave disability or a persistent or acute disability and ordered to undergo treatment may be released from inpatient treatment when, in the opinion of the medical director of the mental health treatment agency, the level of care offered by the agency is no longer required. The patient may agree to continue treatment voluntarily. If the patient is to be released, the medical director shall arrange for an appropriate alternative placement.

13 B. If a patient WHO IS to be released from inpatient treatment is 14 under guardianship, the medical director of the mental health treatment 15 agency shall notify the guardian and any relevant regional behavioral health 16 authority ten days before the intended release date that the ward no longer 17 requires the level of care offered by the agency. The guardian and, if 18 relevant, the regional behavioral health authority shall arrange alternative 19 placement with the advice and recommendations of the medical director of the 20 mental health treatment agency.

21 C. The medical director of the mental health treatment agency is not 22 civilly liable for any acts committed by the released patient if the medical 23 director has in good faith complied with the requirements of this article.

D. Within ninety days before the expiration of a court order for 24 25 treatment, the medical director of the mental health treatment agency shall conduct an annual review of a patient who has been found to have a grave 26 27 a persistent or acute disability and disability or is undergoing 28 court-ordered treatment to determine whether the continuation of 29 court-ordered treatment is appropriate and to assess the needs of the patient for guardianship or conservatorship, or both. The annual review shall 30 consist of the mental health treatment and clinical records contained in the 31 32 patient's treatment file. The mental health treatment agency shall keep a record of the annual review. If the medical director believes that a 33 continuation of court-ordered treatment is appropriate, the medical director 34 of the mental health treatment agency shall appoint one or more psychiatrists 35 to carry out a psychiatric examination of the patient. In any proceeding 36 conducted pursuant to this section, a patient has the right to have an 37 analysis of the patient's mental condition by an independent evaluation 38 39 pursuant to section 36-538.

40 E. Each examiner participating in the psychiatric examination of the 41 patient shall submit a report to the medical director of the mental health 42 treatment agency that includes the following:

1. The examiner's opinions as to whether the patient continues to have a grave disability or a persistent or acute disability as the result of a mental disorder and BE in need of continued court-ordered treatment. In evaluating the patient's need for continued court-ordered treatment, the examiner must consider, along with all other evidence, the patient's history before and during the current period of court-ordered treatment, the patient's compliance with recommended treatment and any other evidence relevant to the patient's ability and willingness to follow recommended treatment with or without a court order.

4 5 2. A statement as to whether suitable alternatives to court-ordered treatment are available.

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33 34 3. A statement as to whether voluntary treatment would be appropriate.

A review of the patient's status as to guardianship or
conservatorship, or both, the adequacy of existing protections of the patient
and the continued need for guardianship or conservatorship, or both. If the
examiner concludes that the patient's needs in these areas are not being
adequately met, the examiner's report shall recommend that the court order an
investigation into the patient's needs.

13 5. If the patient has an existing guardian who does not have the 14 mental health powers authorized pursuant to section 14-5312.01, a 15 recommendation as to whether the additional mental health powers authorized 16 by section 14-5312.01 should be imposed on the existing guardian and whether 17 the patient's needs can be adequately addressed by a guardian with mental 18 health powers without the need for a court order for treatment or whether the 19 court order for treatment should continue regardless of the additional mental 20 health powers imposed on the guardian.

6. The results of any physical examination conducted during the period
 of court-ordered treatment if relevant to the psychiatric condition of the
 patient.

24 F. After conducting the annual review as prescribed in this section. 25 if the medical director believes that continued court-ordered treatment is 26 necessary or appropriate, not later than thirty days before the expiration of 27 the court order for treatment, the medical director shall file with the court an application for continued court-ordered treatment alleging the basis for 28 29 the application and shall file simultaneously with the application any 30 psychiatric examination conducted as part of the annual review. If the 31 patient is under guardianship, the medical director shall mail a copy of the application to the patient's guardian. 32

G. If an application for continued court-ordered treatment is filed, all of the following apply:

If the patient does not have an attorney, the court shall appoint
 an attorney to represent the patient.

2. Within ten days after appointment, an attorney appointed pursuant to this subsection, to the extent possible, shall fulfill the duties imposed pursuant to section 36-537, review the medical director's report and the patient's medical records, interview any physician who prepared a report on the annual review and file a response requesting a hearing or submitting the matter to the court for a ruling based on the record without a hearing.

3. If a hearing is not requested, the court shall rule on the
application or set the matter for hearing. If a hearing is requested, the
hearing shall be held within three weeks after the request for hearing is
filed. The hearing may be continued for good cause on motion of a party or
on the court's own motion, and the expiration of the current court order for

treatment may be extended until a ruling by the court on an application filed pursuant to this subsection.

3 4. The patient's attorney must be present at all hearings and may 4 subpoena and cross-examine witnesses and present evidence. The patient has 5 the right to attend all hearings, but may choose not to attend a hearing. The patient's attorney may waive the patient's presence after speaking with 6 7 the patient and confirming that the patient understands the right to be 8 present and does not desire to attend. If the patient is unable to be 9 present at the hearing for medical or psychiatric reasons and the hearing cannot be conducted where the patient is being treated or confined, or the 10 patient cannot appear by another reasonably feasible means, the court shall 11 12 require clear and convincing evidence that the patient is unable to be 13 present at the hearing and on such a finding may proceed with the hearing in 14 the patient's absence.

15 5. The evidence presented by the applicant includes the testimony of 16 one or more witnesses acquainted with the patient during the period of 17 court-ordered treatment, which may be satisfied by a statement agreed on by 18 the parties, and the testimony of any physician who performed an annual 19 review of the patient, which may be satisfied by stipulating to the admission 20 of the examining physicians' written report prepared pursuant subsection E of 21 this section. The court may waive the need for the applicant to present the testimony of witnesses acquainted with the patient as required by this 22 subsection, if it finds that the need for a continued court order for 23 treatment has been established by clear and convincing evidence from the 24 other testimony and evidence presented at the hearing. 25

6. At a hearing held pursuant to this subsection, the court, with 26 27 notice, may impose on an existing guardian additional powers pursuant to 28 section 14-5312.01. If the court finds that the patient's needs can be 29 adequately met by an existing guardian with the additional powers pursuant to section 14-5312.01 and that a court order for treatment is not necessary to 30 31 ensure compliance with necessary treatment, the court may terminate the court 32 order for treatment or decline to issue an order continuing court-ordered treatment. The court may also order an investigation into the need for 33 34 guardianship or conservatorship, or both, and may appoint a suitable person or agency to conduct the investigation. The appointee may include a 35 court-appointed guardian ad litem, a court-appointed investigator pursuant to 36 37 section 14-5308 or the public fiduciary if there is no person willing and 38 qualified to act in that capacity. The court shall give notice of the appointment to the appointee within three days after the appointment. The 39 40 appointee shall submit the report of the investigation to the court within twenty-one days. The report shall include recommendations as to who should 41 42 be guardian or conservator, or both, and the findings and reasons for the 43 recommendation. If the investigation and report so indicate, the court may 44 authorize an appropriate person to file a petition for appointment of a 45 guardian or conservator for the patient.

46 H. If a hearing is held pursuant to subsection G of this section, the
47 party seeking the renewal of the court order must prove all of the following
48 by clear and convincing evidence:

1 1. The patient continues to have a mental disorder and, as a result of 2 that disorder, has either a persistent or acute disability or a grave 3 disability.

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2. The patient is in need of continued court-ordered treatment.

5 6 3. The patient is either unwilling or unable to accept treatment voluntarily.

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I. After a hearing held pursuant to subsection G of this section, the court may order the patient to be released from court-ordered treatment or to undergo continued court-ordered treatment for a period not to exceed the time periods prescribed in section 36-540, subsection D.

J. The deputy director shall create and operate a program to ensure that the examination and review of persons with grave disabilities or persistent or acute disabilities under court order are carried out in an effective and timely manner. The deputy director, with the approval of the director, shall adopt rules needed to operate this program.

Sec. 35. Section 36-545.01, Arizona Revised Statutes, is amended to read:

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36-545.01. <u>Payment of costs and expenses; ability to pay; power</u> <u>and duty of court; acceptance of other benefits;</u> <u>per capita cost limitation; guardians; parental</u> <u>liability; lien; duty of county attorney</u>

A. When a patient is admitted to the state hospital for court-ordered treatment pursuant to article 5 of this chapter or pursuant to section 13-3994, the business manager of the state hospital shall inquire into the ability of the patient to pay the costs of examination, maintenance and treatment. The business manager shall file with the clerk of the court a written report of the manager's findings and the basis of those findings.

B. If the patient is able to pay all or any portion of the charges, the court shall order the payment of the amount the patient can afford of the per capita cost for examination, treatment and maintenance as estimated by the deputy director SUPERINTENDENT. The court, may, upon ON petition of an interested person, and at a hearing of which all concerned parties have received notice, MAY increase or decrease the maintenance charge payable by the patient or the patient's estate.

C. Notwithstanding subsection B of this section, any federal, state, public or private medical benefits which THAT are payable to the state hospital where the patient is receiving care and treatment or which THAT are payable to the patient may be accepted by the state hospital without a court order, except that the state hospital shall not accept any such benefits which THAT alone or in addition to any amounts payable pursuant to subsection B of this section exceed the per capita cost for the patient.

D. The court may, if necessary, MAY appoint a conservator of the patient to carry out this section. If a conservator is appointed, the clerk of the court shall file a certificate so stating. All proceedings relating to such THAT conservatorship shall be had as provided by law for conservators of estates. The conservator shall pay the amount ordered by the court pursuant to subsection B of this section.

4 5 E. If the patient is a minor, the business manager of the state hospital shall inquire into the ability of the minor's parents to bear charges pursuant to this section. All obligations, charges and liens that may be imposed on a patient pursuant to this section shall be imposed on the minor's parents if it is determined that the parents have the ability to pay.

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F. The charges fixed by the court as provided by this section and ordered paid by the patient or the patient's estate, shall, upon ON filing with the county recorder, become a lien upon ON THE property of the patient or the patient's estate.

G. The county attorney of each county, shall, upon ON an order of a judge of the superior court, SHALL enforce the lien and collect the charges from the person ordered to pay if the charges become delinquent.

H. Costs of examination, treatment and maintenance shall not be charged to any patient found by a court of competent jurisdiction to be unlawfully detained.

I. Notwithstanding section 36-545.02, the department shall deposit, pursuant to sections 35-146 and 35-147, monies collected through contracts entered into pursuant to section 36-3410 in the Arizona state hospital fund established by section 36-545.08. The department shall use these monies for the treatment of patients at the state hospital or for the placement of clients in the community.

Sec. 36. Section 36-545.05, Arizona Revised Statutes, is amended to read:

36-545.05. <u>Charges for treatment by agencies under</u> <u>administration contract; charges for prepetition</u> <u>screening and court-ordered evaluation prohibited</u>

A. When a person is given a prepetition screening, or a court-ordered evaluation by a screening agency or evaluation agency pursuant to the provisions of article 4 of this chapter, the person shall not be charged.

B. When a patient is given voluntary treatment pursuant to the provisions of article 3 of this chapter or court-ordered treatment pursuant to the provisions of article 5 of this chapter, the patient or proposed patient will SHALL pay all or such portion of the established charges as the patient can afford. If the patient is indigent, no charges shall be made against him THE PATIENT.

Sec. 37. Section 36-545.06, Arizona Revised Statutes, is amended to read:

38 39 36-545.06. <u>County services</u>

A. Each county, or any combination of counties, shall provide directly or by contract the services of a screening agency and an evaluation agency for the purposes of this chapter.

42 B. Upon ON a request made by a resident of the county pursuant to this 43 chapter, a county shall be required to provide screening or evaluation.

C. Each county shall coordinate the provision of mental health
 services required pursuant to this section with the division of behavioral
 health in the department of health services ADMINISTRATION OR REGIONAL
 BEHAVIORAL HEALTH AUTHORITY.

1 Sec. 38. Section 36-545.07, Arizona Revised Statutes, is amended to 2 read: 3 36-545.07. Contracts between the administration and screening 4 agencies, evaluation agencies and mental health 5 treatment agencies; services; plan 6 A. The division, with the approval of the director, ADMINISTRATION may 7 enter into contracts with screening agencies, evaluation agencies and mental 8 health treatment agencies to provide prepetition screenings, court-ordered 9 evaluations, voluntary evaluations, treatment of voluntary patients and treatment of patients under the provisions of section 36-524 regardless of 10 11 the ability of the patient or proposed patient to pay. A county may be a 12 party to a contract as a provider of services or as a party making payments 13 to an agency to provide services on the part of the county. The state 14 hospital may be included in the contract as a provider of services and may 15 receive consideration not inconsistent with law. 16 B. Contracts to provide services as in subsection A of this section 17 shall be entered into in accordance with a plan of the division, with the 18 approval of the director ADMINISTRATION. This plan shall be developed in 19 accordance with the state comprehensive health plan and in accordance with a 20 plan of the local health planning agency submitted to and approved by the 21 deputy director, except as provided in subsection C of this section. C. If there is no recognized local health planning agency or if the 22 23 local health planning agency does not submit a plan which THAT will, in the 24 judgment of the deputy director, fulfill the requirements for services of 25 subsection A of this section, the deputy director may develop a plan and 26 require that it be followed in lieu of a plan of the local health planning 27 agency. The plan of the deputy director shall be adopted after holding a 28 hearing and fulfilling the requirements of title 41, chapter 6. 29 D. If funds MONIES at the disposal of the division ADMINISTRATION are 30 used for services as in subsection A of this section, the contract shall 31 conform to the requirements of section 36-189, subsection B. 32 E. A contract to provide services as in subsection A of this section shall specify the services to be provided as to their nature, quality, 33 34 purpose, number, extent and limitations, if any, or any other requirements 35 deputy director ADMINISTRATION deems necessary for the proper the 36 administration of services under the plan of the division ADMINISTRATION. F. A contract may specify that the county's participation fulfills in 37 38 full or in part the requirements of the county to provide services under 39 section 36-545.06 and the requirements of the county to pay the cost of 40 services under section 36-545.04. 41 Sec. 39. Section 36-550, Arizona Revised Statutes, is amended to read: 42 36-550. Definitions 43 In this article, unless the context otherwise requires: 44 1. "ADMINISTRATION" MEANS THE ARIZONA HEALTH CARE COST CONTAINMENT 45 SYSTEM ADMINISTRATION. 46 1. 2. "Community residential treatment system" means a statewide 47 system of community-based residential treatment programs for the seriously

mentally ill which THAT provides a wide range of services as alternatives to institutionalization and in the least restrictive setting.

2. "Deputy director" means the deputy director of the division of behavioral health in the department of health services.

3. "Division" means the division of behavioral health in the department of health services.

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3. "DIRECTOR" MEANS THE DIRECTOR OF THE ADMINISTRATION.

"Seriously mentally ill" means persons, who as a result of a 8 4. 9 mental disorder as defined in section 36-501 exhibit emotional or behavioral functioning which THAT is so impaired as to interfere substantially with 10 their capacity to remain in the community without supportive treatment or 11 12 services of a long-term or indefinite duration. In these persons mental 13 disability is severe and persistent, resulting in a long-term limitation of 14 their functional capacities for primary activities of daily living such as 15 relationships, homemaking, self-care, interpersonal employment and 16 recreation.

Sec. 40. Section 36-550.01, Arizona Revised Statutes, is amended to read:

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36-550.01. <u>Statewide plan for community residential treatment</u>

A. The deputy director shall establish a statewide plan for a community residential treatment system by July 1, 1983. Such THE plan shall provide for a statewide system of mental health residential treatment programs which THAT provides to the seriously mentally ill a wide range of programs and services, as identified in section 36-550.05, as alternatives to institutional care.

26 B. In addition to the provisions in subsection A of this section, The 27 statewide plan shall include the following elements:

A description on a county-by-county basis of the current programs
 and service delivery mechanisms providing services to the seriously mentally
 ill.

2. An identification of areas within the state where multiple
 jurisdictions could participate in program delivery utilizing
 intergovernmental contracts.

34 3. Goals, objectives and priorities for the delivery of such services 35 and methods to evaluate program effectiveness of goals, objectives and 36 priorities.

37 4. Cooperation with the counties to develop and maintain a coordinated
38 system for delivery of residential care.

39 5. Methods for estimating the need for community residential treatment
 40 services and for allocating state funds MONIES according to that need.

C. The deputy director may establish such rules and regulations, with
 the approval of the director, as are necessary for the implementation of this
 article.

1 Sec. 41. Section 36-550.02, Arizona Revised Statutes, is amended to 2 read: 3 36-550.02. County responsibilities in statewide planning 4 process 5 A. Each county shall be responsible for developing an individual 6 county profile of existing programs, needs and goals for consideration by the 7 director for inclusion within the statewide plan as required in section 8 36-550.01. 9 B. The deputy director, upon ON receipt of the county profile required 10 in subsection A of this section, shall incorporate those portions compatible 11 with the statewide plan, and, in cooperation with the county, modify those 12 portions of the profile determined by the deputy director to be incompatible 13 with the statewide plan. 14 Sec. 42. Section 36-550.03, Arizona Revised Statutes, is amended to 15 read: 16 36-550.03. <u>Statewide plan implementation: contract</u> 17 requirements: exception 18 A. Upon ON establishment of the statewide plan for a community 19 residential treatment system as required in section 36-550.01, the deputy 20 director shall provide for the delivery of such programs and services, 21 utilizing all **funds** MONIES identified and available for the seriously 22 mentally ill, in the following manner: 23 1. Provide such programs and services directly through the division 24 ADMINISTRATION or by contract with other public or private agencies. 2. Contract with individual counties to provide programs and services 25 26 directly or by contract with other public or private agencies. 27 3. Provide for programs and services by any combination of service 28 delivery mechanisms as prescribed in paragraphs 1 and 2 of this subsection. 29 B. The deputy director may use any funds MONIES available to the 30 division ADMINISTRATION for the purposes of this article to provide for the 31 establishment and maintenance of community residential treatment programs and 32 services. If the deputy director contracts with a county as prescribed in subsection A of this section, the deputy director may require not more than a 33 twenty-five per cent PERCENT match of local or other funds MONIES. The 34 35 matching requirement for local or other funds MONIES may be provided by 36 either direct funding or by in-kind services. C. If the programs and services prescribed in subsection A of this 37 38 section are provided through a contract with a private agency, the deputy 39 director shall not require matching funds MONIES as a condition for a 40 contract to provide services. Sec. 43. Section 36-550.04, Arizona Revised Statutes, is amended to 41 42 read: 43 36-550.04. Evaluation system; contract requirements 44 A. The deputy director shall develop and implement an evaluation 45 system which shall include, but not be limited to, THAT INCLUDES program 46 planning and development, fiscal and data management and contract 47 administration.

B. A county which THAT desires to contract with the deputy director ADMINISTRATION to deliver programs and services as provided by this article may initiate such A contract upon ON a majority vote of the COUNTY'S board of supervisors. Such THE contract may be implemented directly by the county or indirectly by contract with other public or private nonprofit agencies.

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C. Any county contracting with the division ADMINISTRATION shall meet the evaluation requirements established by the deputy director pursuant to subsection A OF THIS SECTION.

Sec. 44. Section 36-550.06, Arizona Revised Statutes, is amended to read:

36-550.06. <u>Client eligibility</u>

A. The seriously mentally ill are eligible for services under this article if they comply with the eligibility screening and application process prescribed in section 36-3408, and under any of the following circumstances:

1. They voluntarily seek the services.

2. The department REGIONAL BEHAVIORAL HEALTH AUTHORITY receives a request for these services from a guardian who is authorized to consent to inpatient treatment pursuant to section 14-5312.01.

3. A court orders that they receive the services.

4. The chief medical officer of the Arizona state hospital recommends they receive such services.

B. Programs and services identified in section 36-550.05 may include purchase of care support payments to persons to supplement social security, supplemental security income or veterans administration UNITED STATES DEPARTMENT OF VETERANS AFFAIRS disability payments, and client fees when available.

Sec. 45. Section 36-550.07, Arizona Revised Statutes, is amended to read:

36-550.07. <u>Community residential treatment system planning</u> <u>grants</u>

A. The deputy director may award grants to counties to facilitate the planning of community residential treatment systems for the seriously mentally ill at the local level. Such THE grants shall be used to compensate personnel for the preparation of a written plan which shall include THAT INCLUDES the following information:

1. An estimate of the need for residential treatment services in the area.

2. A survey of all existing residential treatment and day or socialization programs in the area to be served by the system.

An identification of those residential treatment programs needed to
 provide the continuum of residential treatment programs described in this
 article and strategy to encourage their development.

4. A statement on the relationship of the proposed services to the 44 long-range behavioral health development plans.

45 5. A financial estimate of the costs for system planning, development 46 and operation.

47 6. An estimate of the availability of resources, including health
48 manpower and management personnel.

7. An analysis of the availability of alternative, less costly or more 1 2 effective methods to provide the services. 3 B. The deputy director shall establish criteria for determining the eligibility of county applicants for community residential treatment system 4 5 planning grants. Such THE criteria may include requiring each county 6 applicant to provide local matching **funds** MONIES for community residential 7 treatment system planning. If local matching funds MONIES are required, the 8 matching requirement for state funds MONIES is seventy-five per cent PERCENT 9 state and twenty-five per cent PERCENT from local or other sources. Sec. 46. Section 36-556, Arizona Revised Statutes, is amended to read: 10 11 36-556. Coordination with department of health services; duties 12 <u>of department</u> 13 The department OF ECONOMIC SECURITY shall coordinate with the division 14 of behavioral health in the department of health services in: 15 1. The development of specialized programs for persons with 16 developmental disabilities at the state hospital. 17 2. Planning and providing residential care services and related child, 18 adult and resource services for persons with developmental disabilities upon 19 ON their discharge from the state hospital, in accordance with section 20 36-560. The division of behavioral health DEPARTMENT OF HEALTH SERVICES shall provide THE DEPARTMENT OF ECONOMIC SECURITY WITH notice fifteen days 21 22 prior to BEFORE discharge. 23 Sec. 47. Section 36-2021, Arizona Revised Statutes, is amended to 24 read: 36-2021. Definitions 25 26 In this chapter, unless the context otherwise requires: 1. "ADMINISTRATION" MEANS THE ARIZONA HEALTH CARE COST CONTAINMENT 27 28 SYSTEM ADMINISTRATION. 29 1. 2. "Alcoholic" means a person who habitually lacks self-control with respect to the use of alcoholic beverages or who uses alcoholic 30 31 beverages to the extent that his THE PERSON'S health is substantially 32 impaired or endangered or his social or economic functions are substantially 33 disrupted. "Approved private treatment facility" means a private agency 34 2. 3. meeting the standards established by the division DEPARTMENT and approved 35 pursuant to sections 36-2023 and 36-2029. 36 37 3. 4. "Approved public treatment facility" means a treatment agency 38 operating under the directions and control of a county, providing treatment through a contract with a county, meeting the standards established by the 39 40 division DEPARTMENT and approved pursuant to sections 36-2023 and 36-2029. 4. 5. "Chronic alcoholic" means an alcoholic who is incapacitated by 41 42 alcohol and who during the preceding twelve months has been admitted to a 43 local alcoholism reception center on ten or more occasions or has been 44 admitted for three or more episodes of inpatient or residential alcoholism 45 treatment. 46 5. 6. "Court" means a court of record, a justice of the peace court, 47

a police court or a city court authorized by charter.

6. 7. "Department" means the department of health services.

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7. "Deputy director" means the deputy director of the division of
 behavioral health in the department of health services.

8. "Director" means the director of the department of health services ADMINISTRATION.

9. "Division" means the division of behavioral health in the department of health services.

10. 9. "Evaluation" means A multidisciplinary professional analysis of a person's medical, psychological, social, financial and legal conditions. Persons providing evaluation services shall be properly qualified professionals and may be full-time employees of an approved treatment facility providing evaluation services or may be part-time employees or may be employed on a contractual basis.

13 11. 10. "Incapacitated by alcohol" means that a person as a result of 14 the use of alcohol is unconscious or has his judgment otherwise so impaired 15 that he THE PERSON is incapable of realizing and making a rational decision 16 with respect to his THE PERSON'S need for evaluation and treatment, is unable 17 to take care of his basic personal needs or safety such as food, clothing, 18 shelter or medical care or lacks sufficient understanding or capacity to make 19 or communicate rational decisions concerning himself.

12. 11. "Intoxicated person" means a person whose mental or physical functioning is substantially impaired as a result of the immediate effects of alcohol in his THE PERSON'S system.

13. 12. "Local alcoholism reception center" or "center" means an
 initial reception agency for a person who is intoxicated or who is
 incapacitated by alcohol to receive initial evaluation and processing for
 assignment for further evaluation or into a treatment program.

14. 13. "Treatment" means the broad range of emergency, outpatient,
 intermediate and inpatient services and care, including diagnostic
 evaluation, medical, psychiatric, psychological and social service care,
 vocational rehabilitation and career counseling, which may be extended to
 alcoholics and intoxicated persons.

Sec. 48. Section 36-2022, Arizona Revised Statutes, is amended to read:

36-2022. Establishment of facilities

A. The division, with the approval of the director, ADMINISTRATION shall develop, encourage and foster statewide, county and local plans and programs for the prevention of alcoholism and treatment of alcoholics and intoxicated persons in cooperation with public and private agencies, organizations and individuals and provide technical assistance and consultation services for these purposes.

B. Counties may establish a public treatment facility or facilities
for the evaluation and treatment of alcoholics and intoxicated persons by
resolution of the board of supervisors.

44 C. Counties may contract with other counties for the services of a 45 public treatment facility or may contract with a private treatment facility. Sec. 49. Section 36-2023, Arizona Revised Statutes, is amended to read:

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36-2023. <u>Rules</u>

A. The department shall adopt and enforce rules to establish standards for approved public and private treatment facilities that must be met for a treatment facility to be approved. The department periodically shall inspect approved facilities at reasonable times and in a reasonable manner. Each approved public and private treatment facility shall file with the department on request information the department requires pursuant to rule. The department shall remove from the list of approved treatment facilities an approved A facility that without good cause fails to furnish information as requested or that files fraudulent information.

B. The department in compliance with subsection A OF THIS SECTION shall adopt and may amend or repeal rules for the acceptance of persons into a treatment program, in light of the available treatment resources and facilities, with a view to the early and effective provision of evaluation and treatment for alcoholics and intoxicated persons. In establishing the rules, the department shall be guided by the following standards:

1. An intoxicated person or person incapacitated by alcohol, who voluntarily seeks treatment or who is transported to an approved facility by a peace officer or other person, shall be initially brought to and evaluated at a local alcoholism reception center.

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2. A person shall receive an initial evaluation.

3. A patient shall be initially assigned or transferred to outpatient treatment or intermediate treatment, unless the person is found to require inpatient treatment.

4. A person shall not be denied treatment solely because the person has withdrawn from treatment against medical advice on a prior occasion or because the person has relapsed after earlier treatment.

5. An individualized treatment plan shall be prepared and maintained on a current basis for each patient.

6. Provision shall be made for a continuum of coordinated treatment services, so that a person who leaves the facility or another form of treatment will have available and use other appropriate treatment.

C. The department ADMINISTRATION shall:

Enlist the assistance of all public and private agencies,
 organizations and individuals engaged in the prevention of alcoholism and
 treatment of alcoholics and intoxicated persons at approved public and
 private facilities.

Cooperate with the state department of corrections in establishing
 and conducting programs to provide treatment for alcoholics in penal
 institutions and alcoholics on parole or community supervision from penal
 institutions at approved public and private facilities.

3. Cooperate with the department of education, schools, police
 departments, courts and other public and private agencies, organizations and
 individuals in establishing programs for the prevention of alcoholism and
 treatment of alcoholics and intoxicated persons and in preparing curriculum
 materials for use at all levels of school education.

4. Specify a uniform method for keeping statistical information by
 approved public and private treatment facilities and collect and make
 available relevant statistical information, including the number of persons
 treated, frequency of admission, and readmission and frequency and duration
 of treatment.

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5. Cooperate with the department of transportation in establishing and conducting programs designed to deal with the problem of persons operating motor vehicles while intoxicated.

9 6. Prepare an annual report on drug abuse treatment programs in this 10 state that receive funds MONIES from the department ADMINISTRATION to be 11 submitted by January 1 of each year to the governor, the president of the 12 senate and the speaker of the house of representatives and to be made 13 available to the general public through the Arizona drug and gang prevention 14 resource center. The report shall include:

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33 34 (a) The name and location of each program.

(b) The amount and sources of funding for each program.

17 (c) The number of clients who received services during the preceding18 fiscal year.

(d) A description of the demographic characteristics of the client population served by each program, including age groups, gender and ethnicity.

(e) A description of client problems addressed by the programs, including the types of substances abused.

(f) A summary of the numbers and types of services available and provided during the preceding fiscal year.

(g) An evaluation of the results achieved by the programs.

Sec. 50. Section 36-2024, Arizona Revised Statutes, is amended to read:

36-2024. Treatment of alcoholics

A. An alcoholic may apply for evaluation and treatment directly to any approved public or private treatment facility. If the applicant is a minor or incompetent person, either he THE APPLICANT or a parent, legal guardian or other legal representative OF THE APPLICANT shall make the application APPLY for evaluation and treatment.

35 B. Subject to rules adopted by the division, with the approval of the director DEPARTMENT, the administrator in charge of any approved public or 36 37 private treatment facility may determine who shall be admitted for evaluation 38 and treatment. If a person is refused admission to an approved private 39 treatment facility because of financial reasons, the administrator in charge, 40 subject to rules established by the division, with the approval of the director DEPARTMENT, shall refer the person to an approved public treatment 41 42 facility for treatment, if possible and appropriate.

C. If a patient WHO IS receiving inpatient care leaves an approved
 treatment facility, he THE PATIENT shall be encouraged to consent to
 appropriate outpatient treatment or intermediate treatment.

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Sec. 51. Section 36-2026, Arizona Revised Statutes, is amended to read: 36-2026. Emergency admission

A. A publicly intoxicated person may be brought by a peace officer or any other person to an approved local alcoholism reception center for emergency evaluation and treatment if the intoxicated person:

7 1. Has threatened, attempted or inflicted physical harm on self or 8 others, and is likely to inflict physical harm on self or others unless 9 admitted.

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2. Is incapacitated by alcohol.

A peace officer who has reasonable cause to believe that a person 11 Β. 12 is intoxicated in a public place and such THAT THE person is or may be a 13 danger to self or others may transport such THE person to a local alcoholism 14 reception center. Unnecessary or unreasonable force shall not be used in 15 transporting the person, and the person shall not be subjected to any greater 16 restraint than is necessary to transport the person to the local alcoholism 17 reception center.

18 C. A peace officer, who has reasonable cause to believe that a person 19 is intoxicated in a public place or a place open to the public, and THAT the 20 person is or may be a danger to self or others and THAT there is no responsible person immediately available to assist the intoxicated person, 21 22 may transport the person to a detention facility if both of the following 23 circumstances exist APPLY:

24 1. A local alcoholism reception center or other approved facility is 25 not available within ten miles or the peace officer has determined that the local alcoholism reception center or other approved facility is filled to 26 27 capacity and has no further capacity at the present time to provide 28 evaluation and treatment services to additional persons.

29 2. The peace officer has been informed by the governing body of the city or town or the board of supervisors of the county in which the peace 30 31 officer is employed that the deputy director of the division of behavioral 32 health DEPARTMENT has determined that such THE city, town or county has made a reasonable effort to provide adequate local alcoholism reception services 33 34 for persons incapacitated by alcohol and, based on that determination, has issued a renewable three-month temporary waiver to allow the transportation 35 of certain intoxicated persons in the city, town or county to detention 36 facilities pursuant to this section. The determination may be made by the 37 deputy director OF THE DEPARTMENT on application by the governing body of the 38 39 city or town or the board of supervisors of a county.

40 D. An intoxicated person WHO IS received or accepted by a local alcoholism reception center or detention facility shall not be subject to 41 unnecessary or unreasonable force. The local alcoholism reception center or 42 43 detention facility shall use such methods and exercise such restraint of the 44 intoxicated person as is reasonably necessary for the safety of such THE 45 person and others and consistent with the provisions of this section.

46 E. The administrator in charge of an approved local alcoholism 47 reception center shall discharge any person admitted pursuant to this section 48 not more than twenty-four hours, excluding weekends and holidays, after the

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person requests to be discharged or after the administrator on advice of the
 medical staff determines that the grounds for admission no longer exist.

F. Any person WHO IS transported to a detention facility pursuant to this section may be held in protective custody until the person is no longer intoxicated, until released to a responsible person or for a period not exceeding twelve hours, whichever occurs first.

G. Any person WHO IS released from protective custody pursuant to this section may BE TRANSPORTED at that person's request be transported to a local alcoholism reception center or approved facility for evaluation and treatment provided IF such facilities are available.

H. A person WHO IS held in protective custody pursuant to this section is not considered to have been arrested or to have been charged with any crime and may not be fingerprinted or photographed for any reason.

Sec. 52. Section 36-2028, Arizona Revised Statutes, is amended to read:

36-2028. <u>Payment for treatment: financial ability of patient or</u> <u>guardian</u>

18 A. A patient WHO IS being treated by an approved treatment facility or 19 the estate of the patient, or a person WHO IS obligated to provide the cost 20 of the evaluation and treatment and having sufficient financial ability, is liable to the approved treatment facility for the cost of evaluation and 21 treatment of the patient. FOR A PERSON WHO IS DETERMINED TO BE ELIGIBLE FOR 22 23 COVERAGE THROUGH THE ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM, FINANCIAL 24 LIABILITY SHALL BE ESTABLISHED in accordance with the rates RULES established by the division ADMINISTRATION. 25

B. The division, with the approval of the director, ADMINISTRATION
shall adopt rules governing financial ability that take into consideration
the income, savings and other personal and real property of the person
required to pay as well as any support being furnished by him THAT PERSON to
any person whom he may be AS required by law to support. THE RULES SHALL
COMPLY WITH APPLICABLE FEDERAL REQUIREMENTS FOR COST SHARING.

C. Each approved treatment facility shall furnish the division ADMINISTRATION with such information as it requires to enable it to establish and maintain a cost reporting system of the cost of the evaluation and treatment. Each approved treatment facility shall insure ENSURE that records are maintained containing such information and in such form as the division shall require ADMINISTRATION REQUIRES for the purposes of this section.

38 D. The division ADMINISTRATION shall prepare and adopt patient fee schedules to be used by approved treatment facilities for services rendered 39 to each patient WHO IS DETERMINED TO BE ELIGIBLE FOR COVERAGE THROUGH THE 40 ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM AND WHO IS afflicted with 41 42 alcoholism. In preparing such patient fee schedules, the division 43 ADMINISTRATION shall take into account the existing charges for available 44 services. The division ADMINISTRATION is not prohibited from including the 45 amount of expenditures for capital outlay in its determination of the fee 46 schedules.

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Sec. 53. Section 36-2029, Arizona Revised Statutes, is amended to

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36-2029. <u>Funding of facilities; contracts; limitations</u>

4 A. The division ADMINISTRATION may use municipal, county, state and 5 federal monies appropriated or otherwise available for the evaluation and 6 treatment of alcoholics to assist in the establishment and maintenance of 7 approved public or private treatment facilities. Such THE monies may be expended for professional fees for services at an approved treatment facility 8 9 or in contract for advancement or reimbursement of services provided at an approved treatment facility or any other appropriate manner and may be used 10 11 for any purpose necessary to provide evaluation and treatment at approved 12 treatment facilities. These monies may not be used for division salaries or 13 any other purpose within the division ADMINISTRATION but may be used 14 for consultation to the division SERVICES in the interest of approved 15 treatment facilities.

16 B. A public or private treatment facility providing or intending to 17 provide evaluation and treatment and desiring to contract with the division 18 ADMINISTRATION for the furnishing of such services shall submit a program, 19 plan and budget to the division ADMINISTRATION on the forms and in the manner 20 required by the division ADMINISTRATION. If such A facility is approved, the 21 division ADMINISTRATION may contract with the facility for services as required and upon ON such terms and conditions as the division shall require 22 23 ADMINISTRATION REQUIRES.

C. Each approved treatment facility shall provide the division
 ADMINISTRATION with a record of all federal, state, county, city and private
 monies received for the previous year and an estimate of monies to be
 received by the facility for the following year.

D. An approved private or public treatment facility providing evaluation and treatment may receive state funding upon ON complying with the rules and regulations established by the division DEPARTMENT AND THE ADMINISTRATION. Any such facility is not eligible for state funding until approved by the deputy director ADMINISTRATION.

E. The provisions of This article shall not be construed to DOES NOT place upon ON the division ADMINISTRATION or the state any liability for the well-being and care of alcoholics or persons incapacitated by alcohol in a public or private treatment facility or the responsibility for funding such programs beyond the limits of legislative appropriation therefor.

38 Sec. 54. Section 36-2051, Arizona Revised Statutes, is amended to 39 read:

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36-2051. <u>Definition of federal act</u>

In this article, unless the context otherwise requires:

1. "Deputy director" means the deputy director of the division of behavioral health in the department of health services.

44 2. "Division" means the division of behavioral health in the
 45 department of health services.

46 3. "federal act" means the drug abuse office and treatment act of 1972
47 and regulations adopted thereunder PURSUANT TO THAT ACT.

1	Sec. 55. Section 36–2052, Arizona Revised Statutes, is amended to
2	read:
3	36-2052. <u>Designation of state agency</u>
4	The <mark>division</mark> ADMINISTRATION is designated as the state authority for
5	the purposes of exercising authority under the federal act.
6	Sec. 56. Section 36–2901, Arizona Revised Statutes, is amended to
7	read:
8	36-2901. <u>Definitions</u>
9	In this article, unless the context otherwise requires:
10	1. "Administration" means the Arizona health care cost containment
11	system administration.
12	2. "Administrator" means the administrator of the Arizona health care
13	cost containment system.
14	3. "Contractor" means a person or entity that has a prepaid capitated
15	contract with the administration pursuant to section 36–2904 OR CHAPTER 34 OF
16	THIS TITLE to provide health care to members under this article OR PERSONS
17	UNDER CHAPTER 34 OF THIS TITLE either directly or through subcontracts with
18	providers.
19	"Department" means the department of economic security.
20	5. "Director" means the director of the Arizona health care cost
21	containment system administration.
22	6. "Eligible person" means any person who is:
23	(a) Any of the following:
24	(i) Defined as mandatorily or optionally eligible pursuant to title
25	XIX of the social security act as authorized by the state plan.
26	(ii) Defined in title XIX of the social security act as an eligible
27	pregnant woman with a family income that does not exceed one hundred fifty
28	per cent PERCENT of the federal poverty guidelines, as a child under the age
29	of six years and whose family income does not exceed one hundred thirty-three
30	per cent PERCENT of the federal poverty guidelines or as children who have
31	not attained nineteen years of age and whose family income does not exceed
32	one hundred thirty-three per cent PERCENT of the federal poverty guidelines.
33	(iii) Under twenty-six years of age and who was in the custody of the
34	department of child safety pursuant to title 8, chapter 4 when the person
35	became eighteen years of age.
36	(iv) Defined as eligible pursuant to section 36-2901.01.
37	(v) Defined as eligible pursuant to section 36-2901.04.
38	(vi) Defined as eligible pursuant to section 36-2901.07.
39	(b) A full-time officer or employee of this state or of a city, town
40	or school district of this state or other person who is eligible for
41	hospitalization and medical care under title 38, chapter 4, article 4.
42	(c) A full-time officer or employee of any county in this state or
43	other persons authorized by the county to participate in county medical care
44	and hospitalization programs if the county in which such officer or employee
45	is employed has authorized participation in the system by resolution of the
46	county board of supervisors.
47	(d) An employee of a business within this state.

2 system. 3 (f) Not enrolled in the Arizona long-term care system pursuant to 4 article 2 of this chapter. 5 (g) Defined as eligible pursuant to section 1902(a)(10)(A)(ii)(XV) and (XVI) of title XIX of the social security act and who meets the income 6 7 requirements of section 36-2929. 8 7. "Graduate medical education" means a program, including an approved 9 fellowship, that prepares a physician for the independent practice of medicine by providing didactic and clinical education in a medical discipline 10 to a medical student who has completed a recognized undergraduate medical 11 12 education program. 13 "Malice" means intent and 8. evil outrageous, oppressive or 14 intolerable conduct that creates a substantial risk of tremendous harm to 15 others. 16 "Member" means an eligible person who enrolls in the system. 9. 17 10. "Modified adjusted gross income" has the same meaning prescribed in 18 42 United States Code section 1396a(e)(14). 11. "Noncontracting provider" means a person who provides health care 19 20 to members pursuant to this article but not pursuant to a subcontract with a 21 contractor. 12. "Physician" means a person licensed pursuant to title 32, chapter 22 23 13 or 17. "Prepaid capitated" means a mode of payment by which a health care 24 13. contractor directly delivers health care services for the duration of a 25 contract to a maximum specified number of members based on a fixed rate per 26 27 member notwithstanding: 28 (a) The actual number of members who receive care from the contractor. 29 (b) The amount of health care services provided to any member. 14. "Primary care physician" means a physician who is a family 30 31 practitioner, general practitioner, pediatrician, general internist, or 32 obstetrician or gynecologist. 15. "Primary care practitioner" means a nurse practitioner certified 33 pursuant to title 32, chapter 15 or a physician assistant certified pursuant 34 to title 32, chapter 25. This paragraph does not expand the scope of 35 practice for nurse practitioners as defined pursuant to title 32, chapter 15, 36 or for physician assistants as defined pursuant to title 32, chapter 25. 37 16. "Section 1115 waiver" means the research and demonstration waiver 38 granted by the United States department of health and human services. 39 17. "Special health care district" means a special health care district 40 organized pursuant to title 48, chapter 31. 41 42 "State plan" has the same meaning prescribed in section 36-2931. 18. 43 19. "System" means the Arizona health care cost containment system 44 established by this article.

(e) A dependent of an officer or employee who is participating in the

1 Sec. 57. Section 36-2907, Arizona Revised Statutes, is amended to 2 read: 3 36-2907. Covered health and medical services; modifications; related delivery of service requirements; 4 5 definition 6 A. Subject to the limitations and exclusions specified in this 7 section, contractors shall provide the following medically necessary health 8 and medical services: 9 1. Inpatient hospital services that are ordinarily furnished by a hospital for the care and treatment of inpatients and that are provided under 10 11 the direction of a physician or a primary care practitioner. For the 12 purposes of this section, inpatient hospital services exclude services in an 13 institution for tuberculosis or mental diseases unless authorized under an 14 approved section 1115 waiver. 15 2. Outpatient health services that are ordinarily provided in 16 hospitals, clinics, offices and other health care facilities by licensed 17 health care providers. Outpatient health services include services provided 18 by or under the direction of a physician or a primary care practitioner. 19 3. Other laboratory and x-ray services ordered by a physician or a 20 primary care practitioner. 4. Medications that are ordered on prescription by a physician or a 21 dentist licensed pursuant to title 32, chapter 11. Persons who are dually 22 23 eligible for title XVIII and title XIX services must obtain available 24 medications through a medicare licensed or certified medicare advantage 25 prescription drug plan, a medicare prescription drug plan or any other entity 26 authorized by medicare to provide a medicare part D prescription drug 27 benefit. 28 5. Medical supplies, durable medical equipment, insulin pumps and 29 prosthetic devices ordered by a physician or a primary care practitioner. Suppliers of durable medical equipment shall provide the administration with 30 31 complete information about the identity of each person who has an ownership 32 or controlling interest in their business and shall comply with federal bonding requirements in a manner prescribed by the administration. 33 6. For persons who are at least twenty-one years of age, treatment of 34 35 medical conditions of the eye, excluding eye examinations for prescriptive 36 lenses and the provision of prescriptive lenses. 37 7. Early and periodic health screening and diagnostic services as 38 required by section 1905(r) of title XIX of the social security act for 39 members who are under twenty-one years of age. 8. Family planning services that do not include abortion or abortion 40 counseling. If a contractor elects not to provide family planning services, 41 42 this election does not disqualify the contractor from delivering all other 43 covered health and medical services under this chapter. In that event, the 44 administration may contract directly with another contractor, including an 45 outpatient surgical center or a noncontracting provider, to deliver family 46 planning services to a member who is enrolled with the contractor that elects 47 not to provide family planning services.

9. Podiatry services ordered by a primary care physician or primary 1 2 care practitioner. 3 10. Nonexperimental transplants approved for title XIX reimbursement. 4 Ambulance and nonambulance transportation, except as provided in 11. 5 subsection G of this section. 6 12. Hospice care. 7 The limitations and exclusions for health and medical services Β. 8 provided under this section are as follows: 9 Circumcision of newborn males is not a covered health and medical 1. 10 service. 11 2. For eligible persons who are at least twenty-one years of age: 12 (a) Outpatient health services do not include occupational therapy or 13 speech therapy. 14 (b) Prosthetic devices do not include hearing aids, dentures, 15 bone-anchored hearing aids or cochlear implants. Prosthetic devices, except prosthetic implants, may be limited to twelve thousand five hundred dollars 16 17 per contract year. 18 (c) Percussive vests and orthotics are not covered health and medical 19 services. 20 (d) Durable medical equipment is limited to items covered by medicare. 21 (e) Podiatry services do not include services performed by a 22 podiatrist. 23 (f) Nonexperimental transplants do not include pancreas-only 24 transplants. (g) Bariatric surgery procedures, including laparoscopic and open 25 gastric bypass and restrictive procedures, are not covered health and medical 26 27 services. 28 C. The system shall pay noncontracting providers only for health and 29 medical services as prescribed in subsection A of this section and as prescribed by rule. 30 D. The director shall adopt rules necessary to limit, to the extent 31 possible, the scope, duration and amount of services, including maximum 32 limitations for inpatient services that are consistent with federal 33 regulations under title XIX of the social security act (P.L. 89-97; 79 Stat. 34 344; 42 United States Code section 1396 (1980)). To the extent possible and 35 practicable, these rules shall provide for the prior approval of medically 36 37 necessary services provided pursuant to this chapter. E. The director shall make available home health services in lieu of 38 39 hospitalization pursuant to contracts awarded under this article. For the purposes of this subsection, "home health services" means the provision of 40 nursing services, home health aide services or medical supplies, equipment 41 42 and appliances that are provided on a part-time or intermittent basis by a 43 licensed home health agency within a member's residence based on the orders 44 of a physician or a primary care practitioner. Home health agencies shall 45 comply with the federal bonding requirements in a manner prescribed by the 46 administration. 47 F. The director shall adopt rules for the coverage of behavioral 48 health services for persons who are eligible under section 36-2901, paragraph

6, subdivision (a). The administration shall contract with the department of 1 2 health services for the delivery of all medically necessary behavioral health 3 services to persons who are eligible under rules adopted pursuant to this 4 subsection. The division of behavioral health in the department of health 5 services THE ADMINISTRATION ACTING THROUGH THE REGIONAL BEHAVIORAL HEALTH 6 AUTHORITIES shall establish a diagnostic and evaluation program to which 7 other state agencies shall refer children who are not already enrolled pursuant to this chapter and who may be in need of behavioral health 8 9 services. In addition to an evaluation, the division of behavioral health 10 ADMINISTRATION ACTING THROUGH REGIONAL BEHAVIORAL HEALTH AUTHORITIES shall 11 also identify children who may be eligible under section 36-2901, paragraph 12 6, subdivision (a) or section 36-2931, paragraph 5 and shall refer the 13 children to the appropriate agency responsible for making the final 14 eligibility determination.

15 G. The director shall adopt rules for the provision of transportation 16 services and rules providing for copayment by members for transportation for 17 other than emergency purposes. Subject to approval by the centers for 18 medicare and medicaid services, nonemergency medical transportation shall not 19 be provided except for stretcher vans and ambulance transportation. Prior 20 authorization is required for transportation by stretcher van and for 21 medically necessary ambulance transportation initiated pursuant to a physician's direction. Prior authorization is not required for medically 22 23 necessary ambulance transportation services rendered to members or eligible 24 persons initiated by dialing telephone number 911 or other designated 25 emergency response systems.

H. The director may adopt rules to allow the administration, at the director's discretion, to use a second opinion procedure under which surgery may not be eligible for coverage pursuant to this chapter without documentation as to need by at least two physicians or primary care practitioners.

31 I. If the director does not receive bids within the amounts budgeted 32 or if at any time the amount remaining in the Arizona health care cost containment system fund is insufficient to pay for full contract services for 33 34 the remainder of the contract term, the administration, on notification to 35 system contractors at least thirty days in advance, may modify the list of 36 services required under subsection A of this section for persons defined as eligible other than those persons defined pursuant to section 36-2901, 37 38 paragraph 6, subdivision (a). The director may also suspend services or may limit categories of expense for services defined as optional pursuant to 39 40 title XIX of the social security act (P.L. 89-97; 79 Stat. 344; 42 United States Code section 1396 (1980)) for persons defined pursuant to section 41 42 36-2901, paragraph 6, subdivision (a). Such reductions or suspensions do not 43 apply to the continuity of care for persons already receiving these services.

J. Additional, reduced or modified hospitalization and medical care benefits may be provided under the system to enrolled members who are eligible pursuant to section 36-2901, paragraph 6, subdivision (b), (c), (d) or (e).

K. All health and medical services provided under this article shall be provided in the geographic service area of the member, except:

3 4 1. Emergency services and specialty services provided pursuant to section 36-2908.

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2. That the director may permit the delivery of health and medical services in other than the geographic service area in this state or in an adjoining state if the director determines that medical practice patterns justify the delivery of services or a net reduction in transportation costs can reasonably be expected. Notwithstanding the definition of physician as prescribed in section 36-2901, if services are procured from a physician or primary care practitioner in an adjoining state, the physician or primary care practitioner in that state similar to title 32, chapter 13, 15, 17 or 25 and shall complete a provider agreement for this state.

L. Covered outpatient services shall be subcontracted by a primary care physician or primary care practitioner to other licensed health care providers to the extent practicable for purposes including, but not limited to, making health care services available to underserved areas, reducing costs of providing medical care and reducing transportation costs.

M. The director shall adopt rules that prescribe the coordination of medical care for persons who are eligible for system services. The rules shall include provisions for the transfer of patients, the transfer of medical records and the initiation of medical care.

N. For the purposes of this section, "ambulance" has the same meaning prescribed in section 36-2201.

Sec. 58. Section 36-2989, Arizona Revised Statutes, is amended to read:

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36-2989. <u>Covered health and medical services; modifications;</u> related delivery of service requirements

A. Except as provided in this section, health and medical services prescribed in section 36-2907 are covered services and include:

1. Inpatient hospital services that are ordinarily furnished by a hospital for the care and treatment of inpatients, that are medically necessary and that are provided under the direction of a physician or a primary care practitioner. For the purposes of this paragraph, inpatient hospital services exclude services in an institution for tuberculosis or mental diseases unless authorized by federal law.

2. Outpatient health services that are medically necessary and ordinarily provided in hospitals, clinics, offices and other health care facilities by licensed health care providers. For the purposes of this paragraph, "outpatient health services" includes services provided by or under the direction of a physician or a primary care practitioner.

43 3. Other laboratory and x-ray services ordered by a physician or a
 44 primary care practitioner.

45 4. Medications that are medically necessary and ordered on 46 prescription by a physician, a primary care practitioner or a dentist 47 licensed pursuant to title 32, chapter 11.

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5. Medical supplies, equipment and prosthetic devices.

6. Treatment of medical conditions of the eye, including eye examinations for prescriptive lenses and the provision of prescriptive lenses for members.

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7. Medically necessary dental services.

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8. Well child services, immunizations and prevention services.

6 9. Family planning services that do not include abortion or abortion 7 counseling. If a contractor elects not to provide family planning services, this election does not disqualify the contractor from delivering all other 8 9 covered health and medical services under this article. In that event, the administration may contract directly with another contractor, including an 10 11 outpatient surgical center or a noncontracting provider, to deliver family 12 planning services to a member who is enrolled with a contractor who elects 13 not to provide family planning services.

10. Podiatry services that are performed by a podiatrist licensed pursuant to title 32, chapter 7 and that are ordered by a primary care physician or primary care practitioner.

11. Medically necessary pancreas, heart, liver, kidney, cornea, lung and heart-lung transplants and autologous and allogeneic bone marrow transplants and immunosuppressant medications for these transplants ordered on prescription by a physician licensed pursuant to title 32, chapter 13 or 17.

12. Medically necessary emergency and nonemergency transportation.

13. Inpatient and outpatient behavioral health services that are the same as the least restrictive health benefits coverage plan for behavioral health services that are offered through a health care services organization for state employees under section 38–651.

14. Hospice care.

B. The administration shall pay noncontracting providers only for health and medical services as prescribed in subsection A of this section.

C. To the extent possible and practicable, the administration and contractors shall provide for the prior approval of medically necessary services provided pursuant to this article.

D. The director shall make available home health services in lieu of hospitalization pursuant to contracts awarded under this article.

35 Behavioral health services shall be provided to members through the Ε. administration's intergovernmental agreement with the division of behavioral 36 37 health in the department of health services CONTRACTORS. The division of 38 behavioral health in the department of health services ADMINISTRATION ACTING THROUGH REGIONAL BEHAVIORAL HEALTH AUTHORITIES shall use its established 39 diagnostic and evaluation program for referrals of children who are not 40 already enrolled pursuant to this article and who may be in need of 41 42 behavioral health services. In addition to an evaluation, the division of 43 behavioral health ADMINISTRATION ACTING THROUGH REGIONAL BEHAVIORAL HEALTH 44 AUTHORITIES shall also identify children who may be eligible under section 45 36-2901, paragraph 6, subdivision (a) or section 36-2931, paragraph 5 and 46 shall refer the children to the appropriate agency responsible for making the 47 final eligibility determination.

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dialing telephone number 911 or other designated emergency response systems. G. The director may adopt rules to allow the administration to use a second opinion procedure under which surgery may not be eligible for coverage pursuant to this article without documentation as to need by at least two physicians or primary care practitioners.

F. The director shall adopt rules for the provision of transportation

services for members. Prior authorization is not required for medically

necessary ambulance transportation services rendered to members initiated by

H. All health and medical services provided under this article shall be provided in the geographic service area of the member, except:

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1. Emergency services and specialty services.

12 2. The director may permit the delivery of health and medical services 13 in other than the geographic service area in this state or in an adjoining 14 state if it is determined that medical practice patterns justify the delivery 15 of services or a net reduction in transportation costs can reasonably be expected. Notwithstanding section 36-2981, paragraph 8 or 11, if services 16 17 are procured from a physician or primary care practitioner in an adjoining 18 state, the physician or primary care practitioner shall be licensed to 19 practice in that state pursuant to licensing statutes in that state that are 20 similar to title 32, chapter 13, 15, 17 or 25.

I. Covered outpatient services shall be subcontracted by a primary care physician or primary care practitioner to other licensed health care providers to the extent practicable for purposes of making health care services available to underserved areas, reducing costs of providing medical care and reducing transportation costs.

J. The director shall adopt rules that prescribe the coordination of
 medical care for members and that include a mechanism to transfer members and
 medical records and initiate medical care.

K. The director shall adopt rules for the reimbursement of specialty services provided to the member if authorized by the member's primary care physician or primary care practitioner.

Sec. 59. <u>Heading change</u>

The chapter heading of title 36, chapter 34, Arizona Revised Statutes, is changed from "DIVISION OF BEHAVIORAL HEALTH" to "BEHAVIORAL HEALTH SERVICES".

Sec. 60. Section 36-3401, Arizona Revised Statutes, is amended to read:

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36-3401. Definitions

In this chapter, unless the context otherwise requires:

40 1. "ADMINISTRATION" MEANS THE ARIZONA HEALTH CARE COST CONTAINMENT 41 SYSTEM ADMINISTRATION.

42 1. 2. "Advisory council" means the Arizona state advisory council on
43 the seriously mentally ill.

44 2. 3. "Children" means persons who are under the age of nineteen
45 years or persons who are under the age of twenty-two years and enrolled in an
46 educational facility.

47 3. 4. "Clean claim" means a claim that can be processed without 48 obtaining additional information from the service provider or from a third

party. Clean claim does not include claims under investigation for fraud or 1 2 abuse or claims under review for medical necessity. 3 4. "Department" means the department of health services. 5. "Deputy director" means the deputy director of the division of 4 5 behavioral health in the department of health services. 6. 5. "Director" means the director of the department of health 6 7 services ADMINISTRATION. 7. "Division" means the division of behavioral health in the 8 9 department of health services. 8. 6. "Regional behavioral health authority" means an organization 10 under contract with the department ADMINISTRATION to coordinate the delivery 11 12 of mental health services in a geographically specific service area of the 13 state for eligible persons. 14 9. 7. "Service provider" means an organization or mental health 15 that meets the criteria established by the department professional 16 ADMINISTRATION and has a contract with the department ADMINISTRATION or a 17 regional behavioral health authority. 18 Sec. 61. <u>Repeal</u> 19 Section 36-3402, Arizona Revised Statutes, is repealed. 20 Sec. 62. Section 36-3403, Arizona Revised Statutes, is amended to 21 read: 22 36-3403. Powers and duties of the director; study; capitation 23 rates 24 A. IN ADDITION TO THE POWERS AND DUTIES PRESCRIBED IN CHAPTER 29 OF THIS TITLE, IN CARRYING OUT THE DUTIES OF THIS CHAPTER, the deputy director 25 26 may, on approval of the director: 27 1. Employ professional, secretarial and clerical staff as are 28 determined necessary by the director to carry out the functions and duties of 29 the division ADMINISTRATION, subject to legislative appropriation. 2. Contract for the services of consultants and other persons which 30 31 THAT are reasonably necessary to enable the division ADMINISTRATION to carry 32 out its functions and duties, subject to legislative appropriation. 3. Contract and incur obligations which THAT are reasonably necessary 33 34 within the general scope of the division ADMINISTRATION. 35 4. Adopt rules which THAT are necessary to carry out the requirements of the division ADMINISTRATION. 36 37 5. Contract or enter into intergovernmental agreements with other 38 public and private nonprofit agencies and entities. to provide matching 39 6. Use monies, facilities or services 40 contributions under federal or other programs which THAT further the objectives and programs of the division ADMINISTRATION. 41 42 7. Accept gifts, grants, matching monies or direct payments from 43 public or private agencies or private persons and enterprises for the conduct 44 of programs which THAT are consistent with the general purposes and 45 objectives of the division ADMINISTRATION. 46 8. Lease at fair market value real property currently occupied by the 47 southern Arizona mental health center for the purposes of operating a private 48 nonprofit behavioral health care facility. Monies collected from the lease 1 of the real property shall be deposited into the building renewal fund 2 established pursuant to section 36-545.09.

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B. The deputy director shall administer:

 Unified mental health programs, to include EXCLUDING the functions of the state hospital and BUT INCLUDING community mental health.

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10 11 2. Addictive behavior programs to include alcohol and drug abuse.

C. Notwithstanding any other law, the deputy director may waive or reduce the requirements for local match.

D. The superintendent of the Arizona state hospital shall be appointed by the deputy director, subject to the approval of the director, and shall report directly to the deputy director.

D. EXCEPT AS OTHERWISE REQUIRED BY THIS CHAPTER, THE DIRECTOR SHALL
 CARRY OUT THE DUTIES OF THIS CHAPTER SUBJECT TO AND CONSISTENT WITH CHAPTER
 29 OF THIS TITLE.

15 E. The department ADMINISTRATION shall contract with an independent 16 consulting firm for an annual study of the adequacy and appropriateness of 17 title XIX reimbursement rates to providers of behavioral health services. 18 The department ADMINISTRATION may require, and the department's contracted 19 providers THE REGIONAL BEHAVIORAL HEALTH AUTHORITIES AND SERVICE PROVIDERS 20 shall provide, financial data to the department ADMINISTRATION FINANCIAL DATA 21 in the format prescribed by the department ADMINISTRATION to assist in the study. A complete study of reimbursement rates shall be completed no less 22 23 than AT LEAST once every five years. The department ADMINISTRATION shall 24 provide the report to the joint legislative budget committee and the Arizona 25 health care cost containment system administration by October 1, 2002 and by 26 ON OR BEFORE October 1 of each year thereafter. The department shall include 27 the results of the study in its yearly capitation request to the Arizona health care cost containment system administration. If results of the study 28 29 are not completely incorporated into the capitation rate, the Arizona health 30 care cost containment system administration shall provide a report to the 31 joint legislative budget committee within thirty days of setting the final 32 capitation rate, including reasons for differences between the rate and the 33 study.

F. Capitation rate adjustments shall be limited to utilization of existing services and inflation unless policy changes, including creation or expansion of programs, have been approved by the legislature or are specifically required by federal law or court mandate.

Sec. 63. Section 36-3404, Arizona Revised Statutes, is amended to read:

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36-3404. Administration budget for behavioral health; funds

A. The department ADMINISTRATION SHALL PRESENT A budget for the
 division shall include REQUEST THAT INCLUDES all information on THE potential
 availability of other monies, including federal monies, which THAT may be
 used in the following fiscal year to fund the behavioral health services
 OTHER THAN WITH RESPECT TO THE OPERATION of the Arizona state hospital.

46 B. The budget request presented pursuant to subsection A of this 47 section shall be divided as follows: 11. A proposed budget for the administration of the division BEHAVIORAL2HEALTH SERVICES.

3 4 2. A proposed budget for the Arizona state hospital, with a specific amount of the total budget estimated to be used for patients who are seriously mentally ill.

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3. 2. A proposed budget for services for each behavioral health program.

C. The deputy director shall establish funds for each behavioral health program. Monies appropriated to the division ADMINISTRATION for these programs, and grants, gifts and fees generated by the division, PROVISION OF THESE PROGRAMS AND GRANTS AND GIFTS TO THE ADMINISTRATION shall be maintained in the appropriate fund to pay program and administrative costs. The administrative costs of each program shall be separately identified in the accounting records of the division ADMINISTRATION.

15 Sec. 64. Section 36-3405, Arizona Revised Statutes, is amended to 16 read:

36-3405. Annual report: reports

A. By ON OR BEFORE January 1 of each year, the director shall submit a financial and programmatic report for the preceding fiscal year to the governor, the speaker of the house of representatives and the president of the senate.

- B. The report required pursuant to subsection A of this section shall
 include revenues and expenditures for the division BEHAVIORAL HEALTH PROGRAMS
 and total revenues and expenditures, including specific identification of
 administrative costs for each behavioral health program by the following
 categories:
- 27 28
- 1. The seriously mentally ill.
- 2. Alcohol and drug abuse.
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3. Children with severe emotional disabilities.

- 4. Domestic violence.
 - 5. The Arizona state hospital.

C. The report required pursuant to subsection A of this section shall include the number of clients served by each behavioral health service.

D. The director shall provide a monthly report to the governor, the speaker of the house of representatives and the president of the senate which THAT shall, by regional behavioral health authority, separately report title XIX and nontitle XIX categories and shall include for each category the number of persons served, the units of service and the amount of funding provided for client services and the amount provided for regional behavioral health authority administration and case management expenses.

Sec. 65. Section 36-3406, Arizona Revised Statutes, is amended to read:

36-3406. <u>Arizona state advisory council on the seriously</u> mentally ill; membership; compensation; duties

A. The Arizona state advisory council on the seriously mentally ill is
 established.

B. The advisory council shall consist of the deputy director OR THE
 DIRECTOR'S DESIGNEE and the following nine members appointed by the governor:

1. One member representing an advocacy group for the seriously 1 2 mentally ill. 3 2. One service provider. 4 3. One member representing a behavioral health contract agency in an 5 urban area. 4. One member representing a behavioral health contract agency in a 6 7 rural area. 8 5. One member of a county health department specializing in the delivery of services to the seriously mentally ill. 9 6. One health care professional who works with the seriously mentally 10 ill and who is not associated with a contract agency providing services. 11 12 7. Three family members of persons who are seriously mentally ill. 13 C. The deputy director OR THE DIRECTOR'S DESIGNEE shall serve as 14 chairman. 15 D. The advisory council shall meet at least every three months. Members of the advisory council are not entitled to compensation 16 Ε. 17 but members appointed are entitled to reimbursement of expenses pursuant to 18 title 38, chapter 4, article 2. 19 F. The division ADMINISTRATION shall provide necessary staff services 20 to the advisory council. 21 G. The advisory council shall advise the division ADMINISTRATION on 22 matters relating to the seriously mentally ill. 23 H. Appointed members of the advisory council shall serve staggered 24 three-year terms. 25 Sec. 66. Section 36-3407, Arizona Revised Statutes, is amended to 26 read: 27 36-3407. Services; contract The division ADMINISTRATION shall contract for the provision of the 28 29 following services relating to the seriously mentally ill: 1. Community education to increase public awareness of the needs of 30 31 persons experiencing behavioral health problems. 2. Coordinated screening and intake. 32 33 3. A coordinated service delivery system. 34 4. Coordinated case management and individualized treatment planning 35 for each client. 5. Ongoing family participation in the planning for and selection of 36 37 continuum of care services. 38 6. A comprehensive continuum of care services, as appropriate for each 39 client. which shall include but not be limited to THAT INCLUDES the 40 following: 41 (a) Home-based services. 42 (b) Prevention and early intervention. 43 (c) Psychiatric evaluation and consultation. 44 (d) Ancillary support services. 45 (e) Crisis intervention, including short-term and mobile crisis 46 stabilization. 47 (f) Outpatient counseling. 48 (g) Residential treatment services.

1	(h) Case management.
2	(i) Partial care services.
3	(j) Secure residential treatment services.
4	(k) Residential treatment services for clients discharged from the
5	Arizona state hospital.
6	(1) Hospitalization services.
7	(m) Psychotropic medication services.
8	(n) Independent living services.
9	(o) Detoxification services.
10	(p) Respite care.
11	(q) Vocational rehabilitation.
12	(r) Transportation.
13	(s) Socialization and recreation.
14	Sec. 67. Section 36-3408, Arizona Revised Statutes, is amended to
15	read:
16	36–3408. <u>Eligibility for behavioral health service system:</u>
17	screening process; required information
18	A. Any person or the person's parent or legal guardian who requests
19	behavioral health services pursuant to this chapter shall comply with a
20	preliminary financial screening and eligibility process developed by the
21	department of health services in coordination with the Arizona health care
22	cost containment system administration and administered at the initial intake
23	level. A person who receives behavioral health services pursuant to this
24	chapter and who has not been determined eligible for title XVIII and for the
25	medicare part D prescription drug benefit, title XIX or title XXI services
26	shall comply annually with the eligibility determination process. If the
27	results indicate that the person may be eligible for title XVIII and for the
28	medicare part D prescription drug benefit, title XIX or title XXI, in order
29	to continue to receive services pursuant to this chapter, the applicant shall
30	submit a completed application within ten working days to the social security
31	administration, the department of economic security or the Arizona health
32	care cost containment system administration, which shall determine the
33	applicant's eligibility pursuant to title XVIII and for the medicare part D
34	prescription drug benefit, section 36–2901, paragraph 6, subdivision (a),
35	section 36-2931, paragraph 5 or section 36-2981, paragraph 6 for health and
36	medical or long-term care services pursuant to chapter 29 of this title. The
37	applicant shall cooperate fully with the eligibility determination process.
38	If the person is in need of emergency services provided pursuant to this
39	chapter, the person may begin to receive these services immediately provided
40	that within five days from the date of service a financial screening is
41	initiated.
42	B. Applicants who refuse to cooperate in the financial screening and
43	eligibility process are not eligible for services pursuant to this chapter.

42 B. Applicants who refuse to cooperate in the financial screening and 43 eligibility process are not eligible for services pursuant to this chapter. 44 A form explaining loss of benefits due to refusal to cooperate shall be 45 signed by the applicant. Refusal to cooperate shall not be construed to mean 46 the applicant's inability to obtain documentation required for eligibility 47 determination. The department of economic security and the Arizona health 48 care cost containment system administration shall promptly inform the 1 department of health services ADMINISTRATION of the applications that are 2 denied based on an applicant's failure to cooperate with the eligibility 3 determination process and, on request, of applicants who do not submit an 4 application as required by this section.

5 C. The department of economic security, in coordination with the 6 department of health services ADMINISTRATION, shall provide on-site 7 eligibility determinations at appropriate program locations subject to 8 legislative appropriation.

D. This section only applies to persons who receive services that are provided pursuant to this section and that are paid for in whole or in part with state **funds** MONIES.

E. A person who requests treatment services under this chapter shall provide personally identifying information required by the department of health services ADMINISTRATION.

F. Except as otherwise provided by law, this section and cooperation with the eligibility determination process do not entitle any person to any particular services that are subject to legislative appropriation.

Sec. 68. Section 36-3409, Arizona Revised Statutes, is amended to read:

36-3409. Fee requirements; fee schedules

A. Clients WHO ARE eligible for non-title NONTITLE XIX services from the department ADMINISTRATION shall be required to pay fees for services.

B. The department ADMINISTRATION shall establish a schedule for fees charged for services provided by public or private agencies receiving state funds MONIES pursuant to this article which shall include, but not be limited to, THAT INCLUDES a sliding fee schedule based upon ON the ability of the client to pay for part or the total cost for services.

Sec. 69. Section 36-3410, Arizona Revised Statutes, is amended to read:

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36-3410. <u>Regional behavioral health authorities; contracts;</u> <u>monthly summaries; inspection; copying fee;</u> <u>children's behavioral health and seriously mentally</u> ill services

A. If the department ADMINISTRATION contracts with behavioral health 34 contractors which THAT would act as regional behavioral health authorities or 35 directly with a service provider for behavioral health services, the 36 department ADMINISTRATION and each behavioral health contractor or service 37 38 provider shall prepare and make available monthly summary statements, in a format prescribed by the department ADMINISTRATION. that separately detail by 39 title XIX and nontitle XIX and by service category and service type, as 40 defined by contract with the department ADMINISTRATION, the number of clients 41 42 served, the units of service provided and the state and federal monies 43 distributed through the department ADMINISTRATION to each regional behavioral 44 health authority or direct contract service provider and the amounts 45 distributed by each regional behavioral health authority or direct contract 46 service provider to their ITS subcontractors. The director may require 47 additional information in the monthly statement which THAT the director

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determines to be critical for proper regulation and oversight of the regional
 behavioral health authority or the direct contract service provider.

B. For services provided directly by a regional behavioral health authority, the maximum reimbursement to that regional behavioral health authority shall be thirty per cent PERCENT above the Arizona health care cost containment system fee for service rate for the particular service rendered.

7 C. Except as provided in subsections D and E of this section, department 8 behavioral health contractors under contract with the 9 ADMINISTRATION to act as regional behavioral health authorities may perform 10 only managed care functions. Regional behavioral health authorities and 11 their subsidiaries shall not deliver behavioral health services directly to 12 clients. The prohibition on regional behavioral health authorities and their 13 subsidiaries delivering behavioral health services directly to clients shall 14 be fully implemented by September 1, 2009.

D. If a direct services behavioral health provider experiences contract performance failure, the regional behavioral health authority, after receiving approval from the department ADMINISTRATION, may provide direct care services for only as long as necessary to assure ENSURE delivery of uninterrupted care to clients and either:

Accomplish the orderly transition of those members to a new
 provider or other existing providers.

2. Until the provider in question reorganizes or otherwise corrects the contract performance failure.

E. Subsection C of this section does not apply to a regional behavioral health authority operated by a federally recognized Indian tribe.

F. In the contracts specified under subsection A of this section, the department ADMINISTRATION may include a provision to charge, PAYABLE TO THE DEPARTMENT OF HEALTH SERVICES, for services provided at the state hospital. The charges are only for clients on whose behalf the contractor has been paid by the department ADMINISTRATION.

G. The summaries and the contracts on which they are based are open to public inspection. The department ADMINISTRATION and each regional behavioral health authority or direct contract service provider shall make the summaries available for inspection and copying at the office of each regional behavioral health authority or direct contract service provider and at the department ADMINISTRATION.

H. The department ADMINISTRATION and a regional behavioral health
 authority or direct contract service provider shall charge a copying fee
 which THAT is not in excess of the actual cost of reproduction or the amount
 charged by the secretary of state pursuant to section 41-126, whichever is
 less.

I. Copying fees received by the department ADMINISTRATION, pursuant to
subsection H of this section, shall be placed in the state general ARIZONA
HEALTH CARE COST CONTAINMENT SYSTEM fund ESTABLISHED BY SECTION 36-2913.

J. Monies appropriated for fiscal year 2001-2002 and each fiscal year
 thereafter for children's behavioral health services shall be spent on
 services only as prescribed by the appropriation and may not be used for any
 other purpose.

1 K. Monies appropriated for fiscal year 2007-2008 and each fiscal year 2 thereafter for seriously mentally ill services shall be spent on services 3 only as prescribed by the appropriation and shall not be used for any other 4 purpose. 5 Sec. 70. Section 36-3411, Arizona Revised Statutes, is amended to 6 read: 7 36-3411. Behavioral health services: timely reimbursement; 8 penalties 9 A. The division ADMINISTRATION shall ensure that behavioral health service providers are reimbursed within ninety days after the service 10 provider submits a clean claim to a regional behavioral health authority. 11 12 B. Any contract issued by or on behalf of the division ADMINISTRATION 13 for the provision of behavioral health services shall include language 14 outlining provisions for penalties for noncompliance with contract 15 requirements. 16 C. If the regional behavioral health authority does not reimburse a provider as required by this section, the director shall subject the regional 17 18 behavioral health authority to the penalty provisions prescribed in the 19 contract, which shall not exceed the interest charges prescribed in section 20 44-1201. The director shall impose any financial penalties levied on the regional behavioral health authority through a reduction in the amount of 21 22 funds MONIES payable to the regional behavioral health authority for 23 administrative expenses. 24 D. The ninety-day deadline imposed by this section is suspended while 25 a formal grievance regarding the legitimacy of a claim is pending. 26 E. The department ADMINISTRATION or a regional behavioral health 27 authority shall not pay claims for covered services that are initially 28 submitted more than nine months after the date of the services for which 29 payment is claimed or that are submitted as clean claims more than twelve 30 months after the date of service for which payment is claimed. A person WHO 31 IS dissatisfied with the denial of a claim by the department ADMINISTRATION 32 or by the regional behavioral health authority has twelve months from the date of the service for which payment is claimed to institute a grievance 33 34 against the department ADMINISTRATION or regional behavioral health 35 authority. 36 F. For claims paid by the department ADMINISTRATION, either directly or through a third-party payor, the director may impose a penalty on a 37 38 regional behavioral health authority or a service provider who submits a claim to the department ADMINISTRATION for payment more than one time after 39 the same claim had been previously denied by the department ADMINISTRATION 40 without having attempted to address the reason given for the denial. The 41 42 penalty imposed by the director shall not exceed the average cost incurred by 43 the department ADMINISTRATION for processing a claim and shall be levied on 44 the regional behavioral health authority or service provider through reducing 45 any future payment or payments until the amount of the penalty has been paid. 46 G. This section does not apply to services provided by a hospital 47 pursuant to section 36-2903.01, subsection G, or section 36-2904, subsection 48 H or I.

1 Sec. 71. Repeal 2 Section 36-3412, Arizona Revised Statutes, is repealed. 3 Sec. 72. Title 36. chapter 34. article 1. Arizona Revised Statutes, is 4 amended by adding a new section 36-3412, to read: 5 36-3412. Contracts; regional behavioral health authorities 6 A. THE DIRECTOR SHALL PREPARE AND ISSUE A REQUEST FOR PROPOSALS FOR 7 BEHAVIORAL HEALTH SERVICES CONSISTENT WITH SECTIONS 36-2906 AND 36-2906.01. B. CONSISTENT WITH SECTION 36-2903, SUBSECTION M, THE ADMINISTRATION'S 8 9 CONTRACTS WITH REGIONAL BEHAVIORAL HEALTH AUTHORITIES SHALL INCLUDE TERMS AS NECESSARY IN THE JUDGMENT OF THE DIRECTOR: 10 11 1. TO ENSURE ADEQUATE PERFORMANCE AND COMPLIANCE WITH ALL APPLICABLE 12 FEDERAL LAWS BY THE REGIONAL BEHAVIORAL HEALTH AUTHORITIES. 13 2. FOR THE MAINTENANCE OF DEPOSITS, PERFORMANCE BONDS, FINANCIAL 14 RESERVES OR OTHER FINANCIAL SECURITY. 15 3. FOR THE WITHHOLDING OR FORFEITURE OF PAYMENTS TO BE MADE TO A 16 REGIONAL BEHAVIORAL HEALTH AUTHORITY BY THE ADMINISTRATION DUE TO THE 17 AUTHORITY'S FAILURE TO COMPLY WITH A PROVISION OF THE AUTHORITY'S CONTRACT 18 WITH THE ADMINISTRATION OR WITH ADOPTED RULES. 19 4. AUTHORIZING THE ADMINISTRATION TO OPERATE A REGIONAL BEHAVIORAL 20 HEALTH AUTHORITY DIRECTLY. C. IF THERE IS AN INSUFFICIENT NUMBER OF QUALIFIED BIDS FOR PREPAID 21 CAPITATED BEHAVIORAL HEALTH SERVICES WITHIN A GEOGRAPHIC SERVICE AREA 22 23 DESCRIBED IN A REQUEST FOR PROPOSALS, THE DIRECTOR MAY EMPLOY ANY OF THE 24 OPTIONS AUTHORIZED BY SECTION 36-2904. SUBSECTION A. D. DURING ANY PERIOD IN WHICH SERVICES ARE NEEDED AND NO CONTRACT 25 26 EXISTS, THE DIRECTOR MAY EMPLOY ANY OF THE OPTIONS AUTHORIZED BY SECTION 27 36-2904, SUBSECTION B. 28 E. IF THERE IS AN INSUFFICIENT NUMBER OF, OR AN INADEQUATE MEMBER 29 CAPACITY IN. CONTRACTS AWARDED TO CONTRACTORS, THE DIRECTOR, IN ORDER TO 30 DELIVER COVERED SERVICES TO MEMBERS ENROLLED OR EXPECTED TO BE ENROLLED IN 31 THE SYSTEM WITHIN A COUNTY, MAY NEGOTIATE AND AWARD WITHOUT A BID A CONTRACT 32 PURSUANT TO SECTION 36-2904, SUBSECTION J. F. TO THE EXTENT THAT SERVICES ARE FURNISHED PURSUANT TO THIS CHAPTER. 33 AND UNLESS OTHERWISE REQUIRED BY THIS CHAPTER, A REGIONAL BEHAVIORAL HEALTH 34 35 AUTHORITY IS NOT SUBJECT TO TITLE 20. G. REGIONAL BEHAVIORAL HEALTH AUTHORITIES ARE SUBJECT TO SECTION 36 37 36-2905. Sec. 73. Section 36-3413, Arizona Revised Statutes, is amended to 38 39 read: 40 36-3413. <u>Grievance and appeal process</u> A. The department ADMINISTRATION shall require all regional behavioral 41 42 health authorities to establish and implement a grievance and appeal process 43 for use by service providers and by individuals receiving and requesting 44 services. The department ADMINISTRATION shall stipulate any required 45 elements of the process in the request for proposal issued to solicit bids 46 from entities that wish to become a regional behavioral health authority. 47 B. The process shall be as prescribed in title 41, chapter 6, article 48 10, SUBJECT TO THE EXCEPTIONS IN SECTION 36-2903.01, SUBSECTION B, PARAGRAPH

4 AND RULES ADOPTED BY THE DIRECTOR, for grievances and appeals filed by 1 2 regional behavioral health authorities and by service providers and 3 individuals receiving and requesting services that have already exhausted the 4 regional behavioral health authority grievance and appeal process. In the 5 case of individuals receiving behavioral health services by a service 6 provider that has contracted directly with the department ADMINISTRATION 7 instead of through a regional behavioral health authority, the department's 8 ADMINISTRATION'S grievance and appeal process is considered the primary 9 process.

10 C. For individuals who are eligible for services pursuant to chapter 11 29 of this title or service providers registered with the Arizona health care 12 cost containment system administration, the department or the regional 13 behavioral health authority shall provide notice that the individuals or 14 providers may appeal a decision rendered by the department to the Arizona 15 health care cost containment system administration if the disputed decision involves services or payments authorized under chapter 29 of this title. 16

17 D. Individuals who are eligible for behavioral health services 18 pursuant to chapter 29 of this title and who are appealing the denial, 19 reduction, termination or suspension of a title XIX behavioral health service 20 may appeal directly to the Arizona health care cost containment system for an 21 expedited hearing pursuant to rules adopted by the director of Arizona health 22 care cost containment system.

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Sec. 74. Repeal

Section 36-3414, Arizona Revised Statutes, is repealed.

Sec. 75. Section 36-3415, Arizona Revised Statutes, is amended to read:

36-3415. <u>Behavioral health expenditures; annual report</u>

Beginning October 1, 2013, The department of health services ADMINISTRATION shall report annually to the joint legislative budget committee on each fiscal year's medicaid and nonmedicaid behavioral health expenditures, including behavioral health demographics including THAT INCLUDE client income, utilization and expenditures, medical necessity oversight practices, tracking of high-cost beneficiaries, mortality trends, placement trends, program integrity and access to services.

35 Sec. 76. Section 36-3431, Arizona Revised Statutes, is amended to 36 read:

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36-3431. Comprehensive behavioral health service system for children; administration duties

A. The division ADMINISTRATION shall develop and implement a comprehensive behavioral health service system for children which shall include THAT INCLUDES the following:

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1. Annual needs assessment and resource assessment studies.

Annual planning to develop policy issues, programs and services. 2.

44 3. Community education to increase public awareness of the needs of 45 children.

- 4. Centralized and coordinated screening and intake.
- 5. Coordinated case management.
- 6. A continuum of treatment services, which may include the following:

1	(a) Home-based services.
2	(b) Prevention and early intervention.
3	(c) Psychological evaluation and consultation.
4	(d) Ancillary support services.
5	(e) Crisis intervention.
6	(f) Outpatient counseling.
7	(g) Independent living services.
8	(h) Secure residential treatment services for seriously emotionally
9	disturbed children.
10	(i) Residential treatment services for children's substance abuse.
11	(j) Psychiatric hospitalization services.
12	7. Evaluation which THAT determines both cost effectiveness and client
13	outcome.
14	B. Subject to legislative appropriation, the <mark>division</mark> ADMINISTRATION
15	shall systematically establish MAINTAIN the system identified in subsection A
16	OF THIS SECTION over a five year period ending on June 30, 1993.
17	C. For the purposes of developing needs assessments and resource
18	assessments and for planning, the division ADMINISTRATION may consult and
19	coordinate with any state agency established for that purpose.
20	Sec. 77. Section 36-3432, Arizona Revised Statutes, is amended to
21	read:
22	36-3432. <u>System plan; annual report</u>
23	The division ADMINISTRATION shall develop a plan for each fiscal year
24 25	identifying the services, the estimated number of clients and an
25 26	appropriations request for the purposes of systematic development and
20	implementation of the comprehensive behavioral health service system for children. The plan shall be presented to the speaker of the house of
28	representatives, the president of the senate and the governor on or before
29	November 1 of each year.
30	Sec. 78. Section 36-3433, Arizona Revised Statutes, is amended to
31	read:
32	36-3433. <u>Annual budget: request and allocation</u>
33	A. The department ADMINISTRATION shall annually include in its budget
34	request a separate appropriations request for the comprehensive behavioral
35	health service system for children. The request shall be based on the annual
36	plan and assessment studies from the division . All behavioral health
37	services provided for children by the division ADMINISTRATION shall be
38	included in the request.
39	B. In preparing its budget request, the division ADMINISTRATION shall:
40	1. Identify that no less than AT LEAST twenty per cent PERCENT of the
41	total amount of appropriations requested be set aside for prevention and
42	early identification programs.
43	2. Allocate up to five per cent PERCENT of the total appropriations
44	requested for evaluation of the system.
45	3. Establish priorities for allocation of funding which THAT include:
46	(a) Outpatient services.
47	(b) Secure residential services for seriously emotionally disturbed
48	children.

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1 (c) Residential services for children with substance abuse problems. 2 (d) Partial care and day treatment services. 3 (e) Emergency services, including crisis shelter, crisis stabilization 4 and emergency inpatient hospitalization. 5 4. Consider the special needs of rural and urban areas of the state 6 and the special needs of cultural and ethnic groups requiring services. 7 C. The division ADMINISTRATION may modify the priorities identified in 8 subsection B of this section based on the results of the division's 9 ADMINISTRATION'S needs assessments and resource assessments and shall include 10 the justification for modifications in its annual plan required pursuant to section 36-3432. No monies allocated for evaluation under subsection B, 11 12 paragraph 2 of this section shall be used for design and implementation of a 13 management information system. 14 D. Subject to legislative appropriation, the division ADMINISTRATION 15 shall establish as a goal an annual increase of total children's service system capacity by ten per cent PERCENT annually. 16 17 Sec. 79. Section 36-3434, Arizona Revised Statutes, is amended to 18 read: 19 36-3434. <u>Current service delivery system; continuation</u> 20 Nothing in this article relieves the state department of corrections, the department of economic security, the department of child safety, the 21 22 department of education, the Arizona health care cost containment system, THE 23 DEPARTMENT OF HEALTH SERVICES or the Arizona supreme court from any current 24 responsibility as prescribed by state or federal law. 25 Sec. 80. Section 36-3435, Arizona Revised Statutes, is amended to 26 read: 27 Intergovernmental agreement; needs and resources 36-3435. 28 assessment; funding and service delivery plan; 29 definition 30 A. Pursuant to section 11-952, the department of health services ADMINISTRATION, the department of child safety, the state department of 31 corrections, the department of education and the supreme court shall enter 32 into an intergovernmental agreement to develop a coordinated multiagency 33 34 assessment of needs and resources and to develop a plan for interagency cooperation relating to funding and service delivery for children with 35 36 behavioral health problems. The plan shall designate agency areas of responsibility for delivery of services. The needs and resources assessment 37 study shall be completed within one year after the intergovernmental 38

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agreement is entered into. The funding and service delivery plan shall be

contract that is awarded, renewed or amended with any regional behavioral

health authority, subcontractor or service provider to specify that every reasonable effort must be made to provide services outside of regular school

hours for any child who is placed in out-of-home care pursuant to title 8,

B. The department of health services ADMINISTRATION shall require each

C. For the purposes of this section, "services" includes appointments

completed within two years after the agreement is entered into.

chapter 4, article 8, 9, 10, 11, 12, 13 or 14.

and activities THAT ARE not related to school.

1	Sec. 81. Section 36-3501, Arizona Revised Statutes, is amended to
2	read:
3	36-3501. <u>Child fatality review team; membership; duties</u>
4	A. The child fatality review team is established in the department of
5	health services. The team is composed of the head of the following
6	departments, agencies, councils or associations, ENTITIES or that person's
7	designee:
8	1. Attorney general.
9	2. Office of women's and children's health in the department of health
10	services.
11	3. Office of planning and health status monitoring in the department
12	of health services.
13	4. Division of behavioral health in the department of health services.
14	4. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM.
15	5. Division of developmental disabilities in the department of
16	economic security.
17	6. Department of child safety.
18	7. Governor's office for children.
19	8. Administrative office of the courts.
20	9. Parent assistance office of the supreme court.
21	10. Department of juvenile corrections.
22	11. Arizona chapter of a national pediatric society.
23	B. The director of the department of health services shall appoint the
24	following members to serve staggered three-year terms:
25	1. A medical examiner who is a forensic pathologist.
26	2. A maternal and child health specialist involved with the treatment
27	of native Americans.
28	3. A representative of a private nonprofit organization of tribal
29	governments in this state.
30	4. A representative of the Navajo tribe.
31	5. A representative of the United States military family advocacy
32	program.
33	6. A representative of a statewide prosecuting attorneys advisory
34	council.
35	7. A representative of a statewide law enforcement officers advisory
36	council who is experienced in child homicide investigations.
37	8. A representative of an association of county health officers.
38	9. A child advocate who is not employed by or an officer of this state
39	or a political subdivision of this state.
40	10. A public member. If local teams are formed pursuant to this
41	article, the director of the department of health services shall select this
42	member from one of those local teams.
43	C. The team shall:
44	1. Develop a child fatalities data collection system.
45	2. Provide training to cooperating agencies, individuals and local
46	child fatality review teams on the use of the child fatalities data system.
47	3. Conduct an annual statistical report on the incidence and causes of
48	child fatalities in this state during the past fiscal year and submit a copy

of this report, including its recommendations for action, to the governor,
 the president of the senate and the speaker of the house of representatives
 on or before November 15 of each year.

4 4. Encourage and assist in the development of local child fatality 5 review teams.

5. Develop standards and protocols for local child fatality review teams and provide training and technical assistance to these teams.

8 6. Develop protocols for child fatality investigations, including
 9 protocols for law enforcement agencies, prosecutors, medical examiners,
 10 health care facilities and social service agencies.

7. Study the adequacy of statutes, ordinances, rules, training and services to determine what changes are needed to decrease the incidence of preventable child fatalities and, as appropriate, take steps to implement these changes.

15 8. Provide case consultation on individual cases to local teams if
 16 requested.

9. Educate the public regarding the incidence and causes of child fatalities as well as the public's role in preventing these deaths.

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10. Designate a team chairperson.

11. Develop and distribute an informational brochure that describes the purpose, function and authority of a team. The brochure shall be available at the offices of the department of health services.

12. Evaluate the incidence and causes of maternal fatalities associated with pregnancy in this state. For the purposes of this paragraph, "maternal fatalities associated with pregnancy" means the death of a woman while she is pregnant or within one year after the end of her pregnancy.

13. Inform the governor and the legislature of the need for specific recommendations regarding unexplained infant death.

14. Periodically review the infant death investigation checklist developed by the department of health services pursuant to section 36-3506. In reviewing the checklist, the review team shall consider guidelines endorsed by national infant death organizations.

D. Team members are not eligible to receive compensation, but members appointed pursuant to subsection B are eligible for reimbursement of expenses pursuant to title 38, chapter 4, article 2.

36 E. The department of health services shall provide professional and 37 administrative support to the team.

F. Notwithstanding subsections C and D of this section, this section
 does not require expenditures above the revenue available from the child
 fatality review fund.

Sec. 82. Section 41-2501, Arizona Revised Statutes, is amended to read:

41-2501. <u>Applicability</u>

A. This chapter applies only to procurements initiated after
January 1, 1985 unless the parties agree to its application to procurements
initiated before that date.

47 B. This chapter applies to every expenditure of public monies, 48 including federal assistance monies except as otherwise specified in section 1 41-2637, by this state, acting through a state governmental unit as defined 2 in this chapter, under any contract, except that this chapter does not apply 3 to either grants as defined in this chapter, or contracts between this state 4 and its political subdivisions or other governments, except as provided in 5 chapter 24 of this title and in article 10 of this chapter. This chapter 6 also applies to the disposal of state materials. This chapter and rules 7 adopted under this chapter do not prevent any state governmental unit or political subdivision from complying with the terms of any grant, gift, 8 9 bequest or cooperative agreement.

10 C. All political subdivisions and other local public agencies of this 11 state may adopt all or any part of this chapter and the rules adopted 12 pursuant to this chapter.

D. Notwithstanding any other law, sections 41-2517 and 41-2546 apply to any agency as defined in section 41-1001, including the office of the governor.

16 E. The Arizona board of regents and the legislative and judicial 17 branches of state government are not subject to this chapter except as 18 prescribed in subsection F of this section.

F. The Arizona board of regents and the judicial branch shall adopt rules prescribing procurement policies and procedures for themselves and institutions under their jurisdiction. The rules must be substantially equivalent to the policies and procedures prescribed in this chapter.

23 G. The Arizona state lottery commission is exempt from this chapter 24 for procurement relating to the design and operation of the lottery or purchase of lottery equipment, tickets and related materials. The executive 25 26 director of the Arizona state lottery commission shall adopt rules 27 substantially equivalent to the policies and procedures in this chapter for procurement relating to the design and operation of the lottery or purchase 28 29 of lottery equipment, tickets or related materials. All other procurement 30 shall be as prescribed by this chapter.

31 H. The Arizona health care cost containment system administration is 32 exempt from this chapter for provider contracts pursuant to section 36-2904, subsection A and contracts for goods and services, including program 33 contractor contracts pursuant to title 36, chapter 29, articles 2 and 3 AND 34 CONTRACTS WITH REGIONAL BEHAVIORAL HEALTH AUTHORITIES PURSUANT TO TITLE 36, 35 36 CHAPTER 34. All other procurement, including contracts for the statewide administrator of the program pursuant to section 36-2903, subsection B, shall 37 38 be as prescribed by this chapter.

I. Arizona industries for the blind is exempt from this chapter for purchases of finished goods from members of national industries for the blind and for purchases of raw materials for use in the manufacture of products for sale pursuant to section 41-1972. All other procurement shall be as prescribed by this chapter.

J. Arizona correctional industries is exempt from this chapter for purchases of raw materials, components and supplies that are used in the manufacture or production of goods or services for sale entered into pursuant to section 41-1622. All other procurement shall be as prescribed by this chapter. 1 K. The state transportation board and the director of the department 2 of transportation are exempt from this chapter other than section 41-2586 for 3 the procurement of construction or reconstruction, including engineering services, of transportation facilities or highway facilities and any other 4 5 services that are directly related to land titles, appraisals, real property 6 acquisition, relocation, property management or building facility design and 7 construction for highway development and that are required pursuant to title 8 28. chapter 20.

9 L. The Arizona highways magazine is exempt from this chapter for 10 contracts for the production, promotion, distribution and sale of the 11 magazine and related products and for contracts for sole source creative 12 works entered into pursuant to section 28-7314, subsection A, paragraph 5. 13 All other procurement shall be as prescribed by this chapter.

14 M. The secretary of state is exempt from this chapter for contracts 15 entered into pursuant to section 41-1012 to publish and sell the 16 administrative code. All other procurement shall be as prescribed by this 17 chapter.

18 N. This chapter is not applicable to contracts for professional 19 witnesses if the purpose of such contracts is to provide for professional 20 services or testimony relating to an existing or probable judicial proceeding 21 in which this state is or may become a party or to contract for special 22 investigative services for law enforcement purposes.

0. The head of any state governmental unit, in relation to any contract exempted by this section from this chapter, has the same authority to adopt rules, procedures or policies as is delegated to the director pursuant to this chapter.

P. Agreements negotiated by legal counsel representing this state in
 settlement of litigation or threatened litigation are exempt from this
 chapter.

Q. This chapter is not applicable to contracts entered into by the department of economic security:

1. With a provider licensed or certified by an agency of this state to provide child day care services.

2. With area agencies on aging created pursuant to the older Americans act of 1965 (P.L. 89–73; 79 Stat. 218; 42 United States Code sections 3001 through 3058ff).

3. For services pursuant to title 36, chapter 29, article 2.

4. With an eligible entity as defined by Public Law 105-285, section 673(1)(a)(i) 673(1)(A)(i), as amended, for designated community services block grant program monies and any other monies given to the eligible entity that accomplishes the purpose of Public Law 105-285, section 672.

R. The department of health services ARIZONA HEALTH CARE COST
 CONTAINMENT SYSTEM may not require that persons with whom it contracts follow
 this chapter for the purposes of subcontracts entered into for the provision
 of the following:

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1. Mental health services pursuant to section 36-189, subsection B.

47 2. Services for the seriously mentally ill pursuant to title 36,48 chapter 5, article 10.

1 3. Drug and alcohol services pursuant to section 36-141. 2 4. S. THE DEPARTMENT OF HEALTH SERVICES MAY NOT REQUIRE THAT PERSONS 3 WITH WHOM IT CONTRACTS FOLLOW THIS CHAPTER FOR THE PURPOSE OF SUBCONTRACTS 4 ENTERED INTO FOR THE PROVISION OF domestic violence services pursuant to 5 title 36, chapter 30, article 1. 6 S_{-} T. The department of health services is exempt from this chapter for contracts for services of physicians at the Arizona state hospital.

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28 29 **T**. U. Contracts for goods and services approved by the board of

trustees of the public safety personnel retirement system are exempt from this chapter.

11 \bigcup . V. The Arizona department of agriculture is exempt from this 12 chapter with respect to contracts for private labor and equipment to effect 13 cotton or cotton stubble plow-up pursuant to rules adopted under title 3, 14 chapter 2, article 1.

15 ₩. The Arizona state parks board is exempt from this chapter for 16 purchases of guest supplies and items for resale such as food, linens, gift 17 items, sundries, furniture, china, glassware and utensils for the facilities 18 located in the Tonto natural bridge state park.

₩. X. The Arizona state parks board is exempt from this chapter for 19 20 the purchase, production, promotion, distribution and sale of publications, souvenirs and sundry items obtained and produced for resale. 21

 $\frac{1}{2}$ Y. The Arizona state schools for the deaf and the blind are exempt 22 23 from this chapter for the purchase of textbooks and when purchasing products 24 through a cooperative that is organized and operates in accordance with state 25 law if such products are not available on a statewide contract and are 26 related to the operation of the schools or are products for which special 27 discounts are offered for educational institutions.

Y. Z. Expenditures of monies in the morale, welfare and recreational fund established by section 26-153 are exempt from this chapter.

30 Z_{-} AA. Notwithstanding section 41-2534, the director of the state 31 department of corrections may contract with local medical providers in 32 counties with a population of less than four hundred thousand persons for the 33 following purposes:

34 1. To acquire hospital and professional medical services for inmates who are incarcerated in state department of corrections facilities that are 35 36 located in those counties.

37 2. To ensure the availability of emergency medical services to inmates 38 in all counties by contracting with the closest medical facility that offers 39 emergency treatment and stabilization.

40 AA. BB. The department of environmental quality is exempt from this chapter for contracting for procurements relating to the water quality 41 42 assurance revolving fund program established pursuant to title 49, chapter 2, 43 article 5. The department shall engage in a source selection process that is 44 similar to the procedures prescribed by this chapter. The department may 45 contract for remedial actions with a single selection process. The exclusive 46 remedy for disputes or claims relating to contracting pursuant to this 47 subsection is as prescribed by article 9 of this chapter and the rules

adopted pursuant to that article. All other procurement by the department shall be as prescribed by this chapter.

3 BB. CC. The motor vehicle division of the department of transportation is exempt from this chapter for third-party authorizations 4 5 pursuant to title 28, chapter 13, only if all of the following conditions 6 exist:

1. The division does not pay any public monies to an authorized third party.

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2. Exclusivity is not granted to an authorized third party.

3. The director has complied with the requirements prescribed in title 28, chapter 13 in selecting an authorized third party.

CC. DD. This section does not exempt third-party authorizations pursuant to title 28, chapter 13 from any other applicable law.

DD. EE. The state forester is exempt from this chapter for purchases and contracts relating to wildland fire suppression and pre-positioning equipment resources and for other activities related to combating wildland fires and other unplanned risk activities, including fire, flood, earthquake, wind and hazardous material responses. All other procurement by the state forester shall be as prescribed by this chapter.

EE. FF. The cotton research and protection council is exempt from this chapter for procurements.

FF. GG. Expenditures of monies in the Arizona agricultural protection fund established by section 3-3304 are exempt from this chapter.

GG. HH. The Arizona commerce authority is exempt from this chapter, except article 10 for the purpose of cooperative purchases. The authority shall adopt policies, procedures and practices, in consultation with the department of administration, that are similar to and based on the policies and procedures prescribed by this chapter for the purpose of increased public confidence, fair and equitable treatment of all persons engaged in the process and fostering broad competition while accomplishing flexibility to achieve the authority's statutory requirements. The authority shall make its policies, procedures and practices available to the public. The authority may exempt specific expenditures from the policies, procedures and practices.

HH. II. The Arizona exposition and state fair board is exempt from this chapter for contracts for professional entertainment.

36 H. JJ. This chapter does not apply to the purchase of water, gas or
 37 electric utilities.

Jd. KK. This chapter does not apply to professional certifications, professional memberships and conference registrations.

KK. LL. The department of gaming is exempt from this chapter for problem gambling treatment services contracts with licensed behavioral health professionals.

43 <u>LL.</u> MM. This chapter does not apply to contracts for credit reporting
44 services.

45 MM. NN. This chapter does not apply to contracts entered into by the 46 department of child safety:

47 1. With a provider of family foster care pursuant to section 8-503 or
48 36-554.

1 2. With an eligible entity as defined by Public Law 105-285, section 2 673(1)(A)(i), as amended, for designated community services block grant 3 program monies and any other monies given to the eligible entity that accomplishes the purpose of Public Law 105-285, section 672. 4 5

Sec. 83. Section 41-3803, Arizona Revised Statutes, is amended to read:

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41 42 41-3803. <u>Human rights committee on the mentally ill</u>

A. The human rights committee on the mentally ill is established in the department of health services ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM to promote the rights of persons who receive behavioral health services pursuant to title 36, chapters 5 and 34.

B. Each region of the state covered by a regional behavioral health authority shall have at least one human rights committee with the authority and responsibilities as prescribed by the department of health services ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM ADMINISTRATION pursuant to rules adopted by the department ADMINISTRATION relating to behavioral health services.

C. The director of the department of health services ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM ADMINISTRATION may establish additional committees to serve persons who receive behavioral health services or to oversee the activities of any service provider.

D. Each committee established pursuant to this section shall consist of at least seven and not more than fifteen members appointed by the director of the department of health services ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM ADMINISTRATION with expertise in at least one of the following areas:

- 1. Psychology.
- 27 2. Law. 28
 - 3. Medicine.
 - 4. Education.
 - 5. Special education.
 - 6. Social work.

Ε. Each human rights committee shall include at least two parents of children who receive behavioral health services pursuant to title 36, chapter 34.

F. Each human rights committee shall include at least two members who are current or former clients of the behavioral health system.

G. Each committee shall be organized pursuant to this section and the requirements of section 41-3804.

Sec. 84. Section 41-3804, Arizona Revised Statutes, is amended to read:

41-3804. Human rights committees; membership; duties; client information: violation: classification

43 A. Subject to the approval of the appropriate department director, 44 each committee established pursuant to this article shall adopt guidelines 45 that govern its operation, including terms of members, quorum and attendance 46 requirements and removal of a committee member if necessary. Each committee 47 shall adopt these guidelines by majority vote within the first three months 48 of its formation. These guidelines shall not conflict with this article.

The director of the appropriate department shall approve the guidelines unless they are inconsistent with the department's statutes, policies, procedures or rules, or if the <u>guideline does</u> GUIDELINES DO not promote participation by all interested members of the community that the committee serves. In addition to the procedures in the guidelines, each human rights committee must approve the removal of any committee member on majority vote of the committee.

B. Employees of the department of economic security, the department of child safety and the department of health services ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM may serve on a committee only as nonvoting members whose presence is not counted for the purpose of determining a quorum.

C. Advocacy groups, local advisory councils, committee members and the director of the appropriate department may submit names of candidates to fill committee vacancies. The appropriate director shall appoint a person to fill a vacancy subject to the approval of the committee.

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D. Each committee shall meet at least quarterly each calendar year.

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E. Each committee shall provide independent oversight to:

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Ensure that the rights of clients are protected.
 Provide research in that committee's field.

3. Review incidents of possible abuse, neglect or denial of a client's

rights.

F. Each committee shall submit written objections to specific problems or violations of client rights by department employees or service providers to the director of the appropriate department for review.

G. Each committee shall issue an annual report of its activities and recommendations for changes to the director of the appropriate department.

H. A committee may request from the appropriate department the services of a consultant or department employee to advise it on specific issues. The consultant may be a member of another human rights committee, a department employee or a service provider. Subject to the availability of monies, the appropriate department shall assume the cost of the consultant. A consultant shall not participate in committee votes.

33 Subject to federal law, committee members and consultants have Ι. 34 access to client information and records maintained by the appropriate 35 department, provider or regional behavioral health authorities to the extent 36 necessary to conduct committee duties. Each person who receives information 37 or records pursuant to this subsection shall maintain the information or 38 records as confidential and sign an agreement to comply with all confidentiality requirements. Any client information or records shall be 39 released to the committee without the designation of personally identifiable 40 information unless the personally identifiable information is required for 41 42 the official purposes of the committee. A VIOLATION OF THIS SUBSECTION IS A 43 CLASS 2 MISDEMEANOR. FOR THE PURPOSES OF THIS SUBSECTION, "personally 44 identifiable information" includes A PERSON'S name, address, date of birth, 45 social security number, tribal enrollment number, telephone or telefacsimile 46 number, driver license number, places of employment or school identification 47 or military identification number or any other distinguishing characteristic 1 that tends to identify a particular person. A violation of this subsection 2 is a class 2 misdemeanor.

3 J. If a committee's request for information or records from a 4 department is denied, the committee may request in writing that the director 5 of the appropriate department review this decision. The agency director or 6 designee shall conduct the review within five business days after receiving 7 the request for review. The agency shall bear the costs of conducting the 8 review. A final agency decision made pursuant to this subsection is subject 9 to judicial review pursuant to title 12, chapter 7, article 6. The agency shall not release any information or records during the period an appeal may 10 11 be filed or is pending.

12 K. Confidential records and information received by the committee or 13 its consultant are subject to the same provisions concerning subpoenas, 14 discovery and use in legal actions as are the original records and 15 information.

L. Any person who, in good faith and without malice and in connection with duties or functions of a committee established pursuant to this article, takes an action or makes a decision or recommendation as a member or agent of a committee or who furnishes records, information or assistance that is related to the duties of a committee is not subject to liability for civil damages in consequence of that action. The court shall determine the presence of malice by clear and convincing evidence.

Sec. 85. Section 41-3955.01, Arizona Revised Statutes, is amended to read:

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34 35 41-3955.01. <u>Seriously mentally ill housing trust fund; purpose;</u> report

A. The seriously mentally ill housing trust fund is established. The director of the department of health services ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM ADMINISTRATION shall administer the fund. The fund consists of monies received pursuant to section 44-313 and investment earnings.

B. On notice from the department of health services DIRECTOR OF THE ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM ADMINISTRATION, the state treasurer shall invest and divest monies in the fund as provided by section 35-313, and monies earned from investment shall be credited to the fund.

C. Fund monies shall be spent on approval of the department of health
 services ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM ADMINISTRATION solely
 for housing projects for the seriously mentally ill.

39 D. The director of the department of health services ARIZONA HEALTH 40 CARE COST CONTAINMENT SYSTEM ADMINISTRATION shall report annually to the 41 legislature on the status of the seriously mentally ill housing trust fund. 42 The report shall include a summary of facilities for which funding was 43 provided during the preceding fiscal year and shall show the cost and 44 geographic location of each facility and the number of individuals benefiting 45 from the operation, construction or renovation of the facility. The report 46 shall be submitted to the president of the senate and the speaker of the 47 house of representatives no later than September 1 of each year.

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E. Monies in the seriously mentally ill housing trust fund are exempt from the provisions of section 35-190 relating to lapsing of appropriations.

F. An amount not to exceed ten per cent PERCENT of the seriously mentally ill housing trust fund monies may be appropriated annually by the legislature to the department of health services ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM for administrative costs in providing services relating to the seriously mentally ill housing trust fund.

G. For any construction project financed by the department of health 8 9 services ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM ADMINISTRATION pursuant to this section, the department of health services ADMINISTRATION shall 10 11 notify a city, town, county or tribal government that a project is planned 12 for its jurisdiction and, before proceeding, shall seek comment from the 13 governing body of the city, town, county or tribal government or an official 14 authorized by the governing body of the city, town, county or tribal 15 government. The department of health services ARIZONA HEALTH CARE COST 16 CONTAINMENT SYSTEM ADMINISTRATION shall not interfere with or attempt to 17 override the local jurisdiction's planning, zoning or land use regulations. 18 Sec. 86. Report

19 On or before November 15, 2015, the Arizona health care cost 20 containment system and the department of health services shall submit a joint 21 report for review by the joint legislative budget committee and the 22 governor's office of strategic planning and budgeting that details the 23 transfer of resources between the two departments pursuant to Laws 2015, 24 chapter 19, section 9.

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Sec. 87. <u>Effective date</u>

26 This act is effective from and after June 30, 2016." 27 Amend title to conform

and, as so amended, it do pass

JUSTIN OLSON Chairman

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