

House Engrossed Senate Bill

~~AHCCCS; personal health information~~  
(now: behavioral health; AHCCCS; health facilities)

State of Arizona  
Senate  
Fifty-sixth Legislature  
Second Regular Session  
2024

# SENATE BILL 1609

AN ACT

AMENDING TITLE 36, CHAPTER 29, ARTICLE 1, ARIZONA REVISED STATUTES, BY  
ADDING SECTIONS 36-2903.14, 36-2903.15 AND 36-2903.16; RELATING TO THE  
ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM ADMINISTRATION.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:

2 Section 1. Title 36, chapter 29, article 1, Arizona Revised  
3 Statutes, is amended by adding sections 36-2903.14, 36-2903.15 and  
4 36-2903.16, to read:

5 36-2903.14. Personal health information; duplicative  
6 paperwork requirements

7 A. THE ADMINISTRATION SHALL REQUIRE ITS CONTRACTED HOUSING PROGRAM  
8 ADMINISTRATORS TO REVIEW AND MINIMIZE DUPLICATIVE PAPERWORK REQUIREMENTS  
9 FOR AND LIMIT THE NUMBER OF CONTRACTORS AND ENTITIES THAT UNNECESSARILY  
10 RECEIVE PERSONAL HEALTH INFORMATION OF MEMBERS WITH SERIOUS MENTAL ILLNESS  
11 WHO ARE RECEIVING SERVICES PURSUANT TO THIS CHAPTER OR CHAPTER 34 OF THIS  
12 TITLE.

13 B. CONTRACTED HOUSING PROGRAM ADMINISTRATORS MAY NOT SELL OR  
14 OTHERWISE SHARE ANY MEMBER'S PERSONAL HEALTH INFORMATION, UNLESS  
15 AUTHORIZED OR REQUIRED BY STATE OR FEDERAL LAW, INCLUDING THE HEALTH  
16 INSURANCE PORTABILITY AND ACCOUNTABILITY ACT PRIVACY STANDARDS (45 CODE OF  
17 FEDERAL REGULATIONS PART 160 AND PART 164, SUBPART E).

18 36-2903.15. Peer specialists; qualifications; oversight;  
19 training; annual report

20 A. THE ADMINISTRATION SHALL DEVELOP AND IMPLEMENT PROCESSES TO  
21 MONITOR ITS CONTRACTORS' OVERSIGHT OF PEER SPECIALISTS TO ENSURE THAT THE  
22 PEER SPECIALISTS MEET QUALIFICATIONS AND RECEIVE THE REQUIRED SUPERVISION  
23 AND TRAINING.

24 B. BEGINNING OCTOBER 1, 2025, IN ADDITION TO ANY OTHER  
25 QUALIFICATIONS, PEER SPECIALISTS SHALL COMPLETE TRAINING THAT IS DEVELOPED  
26 BY THE ADMINISTRATION AND THAT INCLUDES PSYCHOSIS-SPECIFIC CONTENT,  
27 INCLUDING ANOSOGNOSIA.

28 C. ON OR BEFORE NOVEMBER 1, 2024 AND EACH NOVEMBER 1 THEREAFTER,  
29 THE ADMINISTRATION SHALL PROVIDE AN ANNUAL REPORT TO THE GOVERNOR, THE  
30 PRESIDENT OF THE SENATE AND THE SPEAKER OF THE HOUSE OF REPRESENTATIVES ON  
31 THE DEVELOPMENT, IMPLEMENTATION AND MONITORING PROCESSES REQUIRED BY THIS  
32 SECTION.

33 36-2903.16. Patients with a designation of serious mental  
34 illness; discharge; list of medications

35 A HEALTH CARE INSTITUTION THAT PROVIDES INPATIENT BEHAVIORAL HEALTH  
36 SERVICES TO A PATIENT WITH A DESIGNATION OF SERIOUS MENTAL ILLNESS BY THE  
37 ADMINISTRATION SHALL PROVIDE, ON THE PATIENT'S DISCHARGE, AN ACCURATE LIST  
38 OF ALL NECESSARY MEDICATIONS, INCLUDING PSYCHIATRIC MEDICATIONS AND ALL  
39 OTHER PRESCRIPTION MEDICATIONS AND OVER-THE-COUNTER MEDICATIONS, THAT ARE  
40 TO BE TAKEN REGULARLY OR TO BE TAKEN AS NEEDED. THE DISCHARGING HEALTH  
41 CARE INSTITUTION SHALL PROVIDE THE LIST TO THE PATIENT OR THE PATIENT'S  
42 REPRESENTATIVE AND TO A DESIGNATED PERSON FROM THE RESIDENTIAL CARE  
43 INSTITUTION OR HEALTH CARE INSTITUTION THAT IS TO PROVIDE OUTPATIENT  
44 BEHAVIORAL HEALTH SERVICES TO THE PATIENT AS IDENTIFIED BY THE DISCHARGING

1 HEALTH CARE INSTITUTION THAT PROVIDED INPATIENT BEHAVIORAL HEALTH SERVICES  
2 TO THE PATIENT.

3 Sec. 2. Arizona health care cost containment system  
4 administration; study; report

5 On or before January 31, 2025, the Arizona health care cost  
6 containment system administration shall:

7 1. Study the implementation of developing and distributing a  
8 real-time, automated survey to members with a serious mental illness, or  
9 their representatives, to collect feedback, identify quality of care  
10 issues and respond to the needs of members. In studying the implementation  
11 of the survey, the administration shall solicit and consider input from  
12 the public, including, at a minimum, individuals with a serious mental  
13 illness and their representatives.

14 2. Report to the joint legislative budget committee and the  
15 chairpersons of the health and human services committees of the senate and  
16 house of representatives on the development and implementation costs that  
17 would be incurred by the administration.

18 Sec. 3. Arizona health care cost containment system  
19 administration; requirements and processes;  
20 inpatient psychiatric facility discharges

21 The Arizona health care cost containment system administration shall  
22 establish requirements, through rulemaking if necessary, regarding the  
23 discharge of Arizona health care cost containment system members with a  
24 designation of serious mental illness from inpatient psychiatric  
25 facilities. The discharge requirements shall identify processes and the  
26 responsible entities to ensure continuity of care for Arizona health care  
27 cost containment system members on discharge, including psychiatric and  
28 nonpsychiatric medications for which the administration or its contractors  
29 is the primary payor. The processes shall include verification against  
30 the Arizona health care cost containment system member's treatment plan of  
31 medication doses, schedules, quantities and routes of administration by  
32 qualified members of the Arizona health care cost containment system  
33 member's inpatient and outpatient treatment teams.