



## Position Statement: Integrated Health Care in Arizona

### Policy

Mental Health America of Arizona (MHA) believes that all individuals and families should have access to a broad scope of medically appropriate, evidence-based behavioral health services and supports. MHA believes that all individuals and their family members should have choice when selecting behavioral health providers, services and treatment goals.

### Background

As part of the Acute and CRS contracting cycle which begins with Contract Year 2019 (CYE 19), starting on October 1, 2018, AHCCCS intends to offer fully integrated contracts to manage the whole individual. AHCCCS envisions these Integrated Contractors (which may include current RBHAs) offering behavioral health (including mental health and substance use disorder) and physical health services to children (including children with CRS conditions) and adult AHCCCS members not determined to have SMI.

MHA represents the experiences and needs of peers and families who too often endure chronic and intractable barriers to accessing high-quality community-based services and supports. We support the effort to improve the quality of health care delivery. We believe that a modern behavioral health system should provide supports and promote services and systems that facilitate the recovery of people with mental health and substance use conditions so every person with an illness can live a meaningful life in the community. We believe that an integrated behavioral health system must embody the following principles:

- Coverage should include prevention, early-intervention, treatment, and rehabilitation services, and offer a full range of services to address the continuum of behavioral health needs for individuals experiencing mild to severe illnesses.
- The individual should be at the *center* of the health care system.
- Our system should be recovery-oriented and operate within a shared decision-making framework while including adequate reimbursement and flexible staffing so that individuals will have time to work with their recovery team in developing a meaningful treatment plan reflecting their goals and accommodating the acuity of their illness. Adequate time should be available for an individual to work with his or her provider to select the recovery services that are most appropriate for her goals.
- A wide range of services should be available for people based on a range of acuity, disability, and engagement levels. The degree of disability and the need for long-term vs. acute care services, as well as the individual's goals, should dictate the services rendered.
- Recognizing the high prevalence of co-occurring mental health, substance abuse and general health conditions, behavioral health services and supports should be available as an essential component of all programs.
- Plans should cover services provided in frequented locations in order to reduce barriers, identify needs, and engage individuals in care as early as possible.

- Longer-term, more intensive care for illnesses that are proving to be more disabling should be easily accessible and coordination with primary care should be systematic and on-going.
- A graduated set of services should be available, serving the full spectrum of needs, and be responsive to the severity of behavioral health needs.
- Communication and integration between the children's health system and the adult health system should promote seamless delivery of behavioral health services and supports that are developmentally appropriate for the individual.
- Evidence-based interventions focused on the prevention of mental health and substance use conditions should be part of any benefit plan.
- Individuals should develop their own recovery plan with the goal of community integration and engagement in roles that are meaningful to each person. Services should support community integration with a full range of activities, including employment, education, peer support and family and civic participation.
- For individuals with significant disability and longer term care needs, the definition of what is medically necessary should be expanded to ensure that the wide array of services and supports that help individuals integrate into the larger society are accessible.
- Younger adults will have special and different recovery needs than older adults. A special emphasis for them is engaging in education and vocational services that will assist them in becoming self-sufficient and integrated in the community. Early, accessible recovery services for younger adults will likely mitigate large long-term direct and indirect costs for individuals who are not engaged in the workforce and have few social supports in the community.

Mental Health America of Arizona recognizes that there are some incredible services currently offered by AHCCCS. It is our hope that the following services are maintained and/or improved upon by Arizona's future health care providers as they are imperative for the health of this community.

- All staff must have the expertise to serve those with behavioral health issues, as well as those with physical health issues.
- Quality services need to be available to service recipients.
- The behavioral system, with a full continuum of care, should be maintained for adults and children.
- The system of care, for foster kids transitioning into adulthood, needs to be improved.
- Justice services, supportive housing, peer support and crisis services need to be offered to both the SMI and the high acuity GMH/SA populations. Currently, we have staff at each RBHA assigned to work with local providers in each of these areas. This collaboration is vital and needs to continue.
- Peer Support Specialists and Family Support Specialists are crucial. These staff roles should remain a reimbursable service and be offered through the system of care.
- Expedited Health-e-Arizona application services should be offered instantly to eligible applicants.
- Individuals must have the ability to choose between plans, providers and treatment options. Each individual needs their own treatment plan.
- Non-emergency transportation should be available to service recipients.
- Continue the effort to improve the children's system of care and ensure there are accessible behavioral health services.
- Maintain efforts to eliminate the out of state placement for children.

This statement was adopted by the Board on July 13<sup>th</sup>, 2017.