



Children's Behavioral Health Services Fund

FAQ

What is it? "Jakes Law" Senate Bill 1523 or Children's Behavioral Health Services Fund (CBHSF). Spring 2020, the Arizona Legislature passed Jake's Law, funding behavioral health services for uninsured and underinsured children who were referred through an educational institution for services provided through June of 2022. Funds were provided to the state RBHA's to be administered.

Here is the link to the AHCCCS site and the Senate Bill that provides more information.

<https://www.azahcccs.gov/AHCCCS/Initiatives/BehavioralHealthServices/#CurrentProjects>

<https://legiscan.com/AZ/text/SB1523/id/2161283/Arizona-2020-SB1523-Chaptered.html>

Why did the Legislature provide this opportunity for children?

- Funding to provide the full array of AHCCCS Children's System of Care Services for children who have no insurance, or the insurance they do have does not cover the full array of Medicaid covered services.
- Referred children who do not qualify for Medicaid or MHBG-SED services would now be able receive services from your Health Home.

What is the school's responsibility?

- Schools who meet the requirements of the law:
 1. Posting CBHSF policy on their website and
 2. Obtaining parental consent, are able to refer students for behavioral health services, regardless of a student's Medicaid eligibility.
- AZ Department of Education is outreaching all schools to provide guidance on the schools and their responsibility for doing this.
- AHCCCS has stated that behavioral health providers may act in good faith that the school is following the law when a referral is made and take the referral.

How are referrals to occur?

- Behavioral Health Homes in contract with HCA in the north, have historically worked with schools and school districts in their areas, receiving referrals. The current processes you have in place would be continued.

- AHCCCS has posted to their website and is distributing a document that lists all Northern AZ Health Homes that serve children as referral sources for behavioral health services.

What behavioral health services are covered?

- All Medicaid covered services are available through these funds. See AMPM 310-B
- Please Note: CBHSF funding does not constitute an entitlement for any individual to receive services
- <https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/300/310B.pdf>

Are deductibles/copayments covered with CBHSF fund?

- Deductibles/copayments are able to be covered with these funds per AHCCCS

What age of children are served with these funds?

- 2.75 to 21.9 years old -Per ARS Title 15-821

Should CBHSF be used for any school referral?

- No, you would determine eligibility for a child as with any referral.
- The school does not know what funding source a child would be eligible for.
- A referred child/family may be eligible for Medicaid, or MHBG-SED, and so these funds would be payor of last resort

What is the payment responsibility hierarchy?

- Legislature has deemed these funds to be payor of last resort to include any commercial insurance the family may have.
- Payment responsibility should come first, Non-Medicaid Third Party Coverage> then MHBG-SED funding> finally, CBHSF
- CBHSF funds should be used if there is no third party coverage, if there is no more MHBG-SED funding or if the child is not eligible for SED

Do these services have to be provided in a school setting?

- No, these services can be provided where it meets the family's needs, the same as any other Medicaid eligible child.

How do I enroll a child under CBHSF who does not meet any other payment criteria?

- This would be a State Only Enrollment AND Referral Source as ADE in the DUGLESS Portal

How do I bill for CBHSF clients?

- All claims for CBHSF are to be submitted with a V1 modifier

What else is the Health Home responsible for?

- A member/guardian survey.

What is the member/guardian survey and is it required?

- The survey has been developed by AHCCCS in partnership with ADE and the RBHAs to collect data from members about their services.
- AHCCCS is required by law to collect data from members about their experiences with their counseling or treatment delivered through the Children's Behavioral Health Services Fund. Providers are required to distribute the survey.
- These surveys are to be completed by families within the 30-90 day window of initiating services with the behavioral services provider.
- It is encouraged that the member/guardian complete the survey but, their decision to not participate in the survey will not affect their CBHSF coverage.
- Survey link: : <https://forms.gle/nGDjfHUGtApJCqm8>
- See AHCCCS "CBHSF Provider Instructions 2021" below- for additional information.
- See HCA Website and scroll to [Children's Behavioral Health in the Schools](#) for more information too.

Who do I go to if I have questions?

- Victoria.Tewa@healthchoiceaz.com
- Sarah.Hester@healthchoiceaz.com
- Your HCA Provider Representative

AHCCCS -System of Care Department

Instructions for Providers: Children's Behavioral Health Services Fund (CBHSF) Member/Guardian Survey

Who is doing the survey? Arizona Health Care Cost Containment System (AHCCCS), in partnership with the Regional Behavioral Health Authority (RBHA)s, are sponsoring a survey of members that were referred for behavioral health services by a school, to ensure that they get the counseling or treatment that they may need. AHCCCS is required by law to collect data from members about their experiences with their counseling or treatment delivered through the Children's Behavioral Health Services Fund.

What is the purpose? To learn about the experiences members have with the people from whom they have received counseling or treatment. The results of this survey will be used to give feedback to the RBHAs and AHCCCS to help improve the quality of care.

How was I selected? You are part of the provider network from whom members have received services paid through the CBHSF. The members' experiences will give AHCCCS important feedback on how to improve the referral process for the CBHSF.

What kinds of questions will be asked? The survey will ask about experiences the member has had with getting the counseling or treatment needed and received, as well as the referral process to initiate behavioral health services. There are no right or wrong answers.

How long will it take? The survey should take no more than ten (10) minutes to complete.

When do the surveys get completed by the member? The survey should be completed by the member after having received services for thirty (30) days but no later than ninety (90) days after the services have been initiated.

How are the surveys completed? Surveys are to be completed by the member via an electronic device that has access to the internet. If an electronic device is not available, the provider must provide an alternative mobile device for survey completion. The provider can offer a demonstration and assistance to the member to complete. There is no obligation to complete the survey and some questions contain the choice to not answer the specific question. Providers shall ensure that interpretation services are made available to the member if needed, at no cost.

- Survey link : <https://forms.gle/nGDjfHUGtApJCqtm8>

Are the answers confidential? Absolutely. The answers will never be used in any way that could be linked to the member nor their household. The answers will make a statistical report to be sent for potential ongoing funding.

Do the members have to answer? No. The survey is completely voluntary. The decision to participate will not affect coverage in any way.

If you would like to know more about the survey, or have specific questions about filling out the survey, please contact the HCA's Youth and Young Adults Projects Coordinator Sarah Hester Sarah.Hester@healthchoiceaz.com