



Policy:

It is the policy of Crisis Response Network's SMI Eligibility and Care Services department to collaborate with the Regional Behavioral Health Authorities (RBHAs) and AHCCCS Complete Care (ACC) health plans to manage the quality of the SMI evaluations and packets submitted to CRN for SMI determinations. Maintaining high quality of these packets is required to maintain compliance with AHCCCS requirements and ensures minimal barriers in access to care for members.

I. Quality Review of SMI Evaluations and Packets

- A. All SMI evaluations and packets submitted to CRN will be screened to ensure:
 - 1. All AHCCCS-mandated requirements are met,
 - 2. There are no data entry issues and
 - 3. The psychiatric evaluation provides the minimum necessary information to render an SMI determination according to AHCCCS-mandated SMI criteria. (See ECS 2.01 and 2.01A)
- B. If any issues are identified with the packet, the submitting provider is immediately notified.
 - 1. If CRN staff is able to remedy the issue and process the packet, the provider is simply notified that there was an issue.
 - 2. If CRN is unable to process the packet, the provider is notified with a request to resubmit the packet within 24 hours.
 - a) If the packet is received within 24 hours meeting all requirements, CRN will process the packet within timelines.
 - b) If the packet is not received within 24 hours, the packet is redacted from the database and the packet information is logged.

II. Data Quality Threshold

- A. Providers are expected to have issues with less than 15% of the packets submitted.
 - 1. Providers agencies that have issues with more than 15% of their packets submitted for three (3) consecutive months in a row must enlist their staff in CRN's SMI Evaluation and Packet Submission Training.



- B. Providers are expected to submit no packets with errors significant enough to prevent processing.
 - 1. Individuals that submit packets that cannot be processed must attend CRN's SMI Evaluation and Packet Submission Training.

III. Packet Quality Reporting

- A. CRN generates monthly data on each provider's packet quality and submits to the overseeing RBHA or ACC health plan.
- B. CRN will provide a summary with these submissions highlighting whether any provider agency/staff member did not meet the thresholds outlined above, indicating that training is warranted.

IV. Coordination of Training

- A. The RBHA or ACC plan will mandate the provider agency/staff member to take the required training.
- B. CRN will log all attendance to training. Attendance will be reported to the RBHA or ACC plan with the monthly reports, indicating whether any provider agency/staff member is out of compliance with this policy.

Approval:

Justin Chase, LMSW, CPHQ
Chief Executive Officer

9/18/18

Date