

Frequently Asked Questions About Eligibility Determinations for Individuals who may have a Serious Emotional Disturbance

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Q1: How is a designation of Serious Emotional Disturbance (SED) determined?

A1: Prior to October 1, 2023, providers assessed children for a qualifying diagnosis and SED determination was based on having an applicable diagnosis and a provider-determined functional limitation that was then flagged through AHCCCS system.

Q2: How will SED eligibility determinations change effective October 1, 2023?

A2: Effective October 1, 2023, to be eligible for an SED determination an individual must have a qualifying diagnosis and functional impairment caused by the qualifying diagnosis. The process will include the following steps:

1. An evaluation with a qualified clinician occurs no later than seven business days after a request is made, unless there is a current (less than six months old) evaluation that supports the qualifying diagnosis and functional impairment.
2. The qualified clinician sends the required paperwork (assessment) to the vendor.
3. The vendor completes the determination within three, 20, or 60 days, depending on each individual case.
4. The vendor will send notice, in writing, to the individual with the results of the eligibility determination and information on how to receive services (when applicable). The vendor will also notify Arizona Health Care Cost Containment System (AHCCCS) and/or the individual's commercial/private health insurer, the Tribal Regional Health Authority (TRBHA), Tribal Arizona Long Term Care System (ALTCS) Case Manager, ACC-RBHA, and the member's provider.

Q3: How will functional limitations be assessed as a component of the SED determination process?

- A3:** To meet the SED functional impairment criteria, an individual shall have, as a result of a qualifying SED diagnosis, dysfunction in at least one of the four domains listed below for most of the past six months, or for most of the past three months with an expected continued duration of at least three months.
1. Seriously disruptive to family and/or community. Pervasively or imminently dangerous to self or others' bodily safety. Regularly engages in assaultive behavior. Has been arrested, incarcerated, hospitalized, or is at risk of confinement because of dangerous behavior. Persistently neglectful or abusive towards others. Severe disruption of daily life due to frequent thoughts of death, suicide, or self-harm, often with behavioral intent, and/or plan. Affective disruption causes significant damage to the individual's education or personal relationships.
 2. Dysfunction in role performance. Frequently disruptive or in trouble at home or at school. Frequently suspended/expelled from school. Major disruption of role functioning. Requires structured or supervised school setting. Performance significantly below expectation for cognitive/developmental level. Unable to attend school or meet other developmentally appropriate responsibilities.
 3. Child and Adolescent Level of Care Utilization System (CALOCUS) recommended level of care 4, 5, or 6.
 4. Risk of deterioration. A qualifying diagnosis with probable chronic, relapsing, and remitting course, comorbidities (e.g., developmental/intellectual disability, substance use disorder, personality disorders), persistent or chronic factors such as social isolation, poverty, extreme chronic stressors (e.g., life-threatening or debilitating medical illnesses, victimization), or other (e.g., past psychiatric history, gains in functioning have not solidified or are a result of current compliance only, court-committed, care is complicated and requires multiple providers).

Q4: Once the determination process moves under a contracted vendor, what will happen to children who were previously identified (i.e., flagged) as SED in the AHCCCS system?

- A4:** AHCCCS has historically identified individuals who have an SED diagnosis by adding a flag indicator to the member's record in the AHCCCS system, though this did not include any assessment of functional limitations. AHCCCS will discontinue assigning the SED flag indicator as of September 30, 2023 and will instead move to utilizing an SED Behavioral Health Category through the determination process.

Beginning October 1, 2023, AHCCCS encourages providers to refer children who may have SED, including those children with an SED flag indicator in the AHCCCS System and functional impairment secondary to a mental health or emotional disorder, for referral to the Contractor for an SED Eligibility Determination. Providers will be encouraged to refer these individuals at the time of their initial assessment or annual reassessment over the course of FFY 2024, as children who are not determined SED as of October 1, 2024, will no longer have access to Mental Health Block Grant (MHBG) SED funding.

Q5: If I disagree with the outcome of the eligibility determination what can I do?

- A5:** Each applicant has the right to appeal their SED eligibility determination. If there is an appeal, the vendor will make the second decision within three, 20, or 60 days, depending on the need for more information. The vendor will send a notice, in writing, to the individual with the final decision of the appeal. If the individual wishes to appeal the second decision, they have the right to ask for an administrative hearing.

Q6: Use of the CALOCUS for TRBHAs and Tribal ALTCS programs?

- A6:** The Tribal ALTCS and TRBHA programs that choose to use the contractor to render SED Eligibility Determinations on their behalf may use the CALOCUS assessment (or other assessment, as approved by AHCCCS) as part of the SED assessment and evaluation that is then submitted to the contractor. Tribal ALTCS and TRBHAs are not required to use the CALOCUS.

Q7: Who will provide Technical Assistance?

A7: The SED Eligibility Determination Vendor will regularly conduct technical assistance to support education regarding performing an SED Eligibility Determination. SED Determination technical assistance will support both general and clinical assessment focuses which include, and are not limited to, Eligibility Determination practices/education and splitting out SUD from the diagnosis. The SED Eligibility Determination Vendor will also be available to address any questions and/or provide technical assistance to members and providers as needed. The vendor will provide technical assistance to both AHCCCS health plans/providers and commercial/private health insurance and providers working with private health insurance.

Q8: What if a child needs an SED determination?

A8: The parent/guardian (e.g., Health Care Decision Maker known as HCDM) may call their primary care provider (PCP), their established behavioral health provider, their health plan (AHCCCS or commercial/private insurer), or their school to request an SED eligibility determination. If the child is uninsured/underinsured, the HCDM can contact the local [AHCCCS Complete Care-Regional Behavioral Health Agreements \(ACC-RBHA\)](#).

Uninsured and underinsured children may receive behavioral health services that are paid by AHCCCS under the [Mental Health Block Grant \(MHBG\)](#), the [Substance Use Prevention and Treatment Block Grant \(SUBG\)](#), and the [Children’s Behavioral Health Services Fund \(CBHSF\)](#) (dependent upon available funding and services prior to being determined SED).

Below is a graph that depicts situations for which fund source is available to cover the assessment for SED determination as well as in the interim services needed to support the child:

AHCCCS/ Medicaid Enrollment status	Funding of the evaluation/ assessment/ Solari SED Determination Packet submission	Determination Timelines	Funding of Interim Services	Service coverage after Determined SED
Currently enrolled	Plan of enrollment (Medicaid)	Solari to return within three, 20, or 60 days, depending on each individual case.	Plan of enrollment (Medicaid)	Medically necessary services not covered by Medicaid are paid by the ACC-RBHA MHBG
Not enrolled: Referred by a school (uninsured/underinsured)	ACC-RBHA under Children’s Behavioral Health Service Fund (CBHSF)	Solari to return within three, 20, or 60 days, depending on each individual case.	ACC-RBHA under CBHSF	Medically necessary BH services not covered by commercial plans are paid by the ACC-RBHA MHBG
Not enrolled: Referred by crisis provider (uninsured/underinsured)	ACC-RBHA under Crisis block funding	Solari will return within 3 days .	ACC-RBHA under Crisis block funding	Medically necessary BH services not covered by commercial plans are paid by the ACC-RBHA MHBG

Not enrolled: Referred by private insurance/network provider (underinsured)	Commercial insurer	Solari will return within 3 days .	Commercial insurer for medically necessary BH Services. If crisis intervention is not covered by commercial insurer, then ACC-RBHA under Crisis.	Medically necessary BH services not covered by commercial plans are paid by the ACC-RBHA MHBG
Not enrolled: Co-occurring (substance use) (uninsured/underinsured)	ACC-RBHA Substance Use Block Grant (SUBG)	Solari to return within three, 20, or 60 days, depending on each individual case.	ACC-RBHA SUBG	Medically necessary BH services not covered by commercial plans are paid by the ACC-RBHA MHBG for mental health services and SUBG for substance use services

Q9: Can a school make a referral for a student to receive an SED determination?

A9: Yes, when a school refers a student for behavioral health services, at the initial assessment the behavioral health provider determines which funding sources may be available to the student. Refer to Q2 above for steps taken by a behavioral health provider. For more information about behavioral health in schools, go to [Accessing Behavioral Health Services in Schools](#).

Q10: Will an SED determination take up to 60 days?

A10: Solari has committed to making the decision for SED determinations within the three day timeline if no other circumstances occur, such as occasions that more documentation is needed for evaluation by Solari, a determination results in the appeals process regarding the decision made by Solari for the SED determination, or a waiver for time extension is requested by the health care decision maker.

Q11: Will an SED determination automatically become an SMI determination when a child turns 18 years old?

A11: An SED determination does not automatically become an SMI determination when a child turns 18 years old. A child is eligible to receive an SMI determination at age 17 years and 6 months of age. The requirements for the SED and SMI determinations may vary/change depending on the individual and as such, each individual member must receive separate SED and SMI determinations.

Q12: What if a child does not need an SED designation anymore?

A12: An SED determination will remain in place unless the parent/guardian (e.g., Health Care Decision Maker (HCDM)) requests to have it removed. The person requesting removal could be the HCDM for the child with an SED designation or a member of the child’s clinical team. If the HCDM does not agree with an SED designation, the HCDM can ask for an assessment to see whether the child still meets criteria for an SED designation. When a removal of designation is requested, a qualified clinician sends the required documentation to the vendor for evaluation. This process is called “removal of the SED designation” for when the child no longer meets the criteria for an SED designation. This will result in a change to the child’s behavioral health category from Serious Emotional Disturbance to General Mental Health. Removal of the SED designation will mean that the child will no longer be able to access SED funding through MHBG. The SED Eligibility Determination Vendor will also send out result notifications to the HCDMs and be available to address any questions and/or provide technical assistance to members, HCDMs, and providers as needed regarding the removal of the SED designation process.