

Senate Engrossed

~~mental health coverage; collaborative care~~  
(now: collaborative care; appropriation)

State of Arizona  
Senate  
Fifty-sixth Legislature  
First Regular Session  
2023

# SENATE BILL 1018

AN ACT

AMENDING TITLE 36, CHAPTER 34, ARIZONA REVISED STATUTES, BY ADDING  
ARTICLE 4; APPROPRIATING MONIES; RELATING TO COLLABORATIVE CARE.

(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 34, Arizona Revised Statutes, is  
3 amended by adding article 4, to read:

4 ARTICLE 4. COLLABORATIVE CARE

5 36-3451. Definitions

6 IN THIS ARTICLE, UNLESS THE CONTEXT OTHERWISE REQUIRES:

7 1. "COLLABORATIVE CARE MODEL" MEANS THE EVIDENCE-BASED, INTEGRATED  
8 BEHAVIORAL HEALTH SERVICE DELIVERY METHOD THAT IS DESCRIBED AS THE  
9 PSYCHIATRIC COLLABORATIVE CARE MODEL IN 81 FEDERAL REGISTER 80230, THAT  
10 INCLUDES A FORMAL COLLABORATIVE ARRANGEMENT AMONG A PRIMARY CARE TEAM  
11 CONSISTING OF A PRIMARY CARE PHYSICIAN, A CARE MANAGER AND A PSYCHIATRIC  
12 CONSULTANT AND THAT INCLUDES THE FOLLOWING ELEMENTS:

13 (a) CARE DIRECTED BY THE PRIMARY CARE TEAM.

14 (b) STRUCTURED CARE MANAGEMENT.

15 (c) REGULAR ASSESSMENTS OF CLINICAL STATUS USING DEVELOPMENTALLY  
16 APPROPRIATE, VALIDATED TOOLS.

17 (d) MODIFICATION OF TREATMENT AS APPROPRIATE.

18 2. "COLLABORATIVE CARE TECHNICAL ASSISTANCE CENTER":

19 (a) MEANS A HEALTH CARE ORGANIZATION THAT CAN PROVIDE EDUCATIONAL  
20 SUPPORT AND TECHNICAL ASSISTANCE RELATED TO THE COLLABORATIVE CARE MODEL.

21 (b) INCLUDES AN ACADEMIC MEDICAL CENTER.

22 3. "DEPARTMENT" MEANS THE DEPARTMENT OF HEALTH SERVICES.

23 4. "PRIMARY CARE PHYSICIAN" HAS THE SAME MEANING PRESCRIBED IN  
24 SECTION 36-2901.

25 36-3452. Collaborative care uptake fund; administration;  
26 primary care physician grants

27 A. THE COLLABORATIVE CARE UPTAKE FUND IS ESTABLISHED IN THE  
28 DEPARTMENT. THE FUND CONSISTS OF MONIES APPROPRIATED BY THE LEGISLATURE.  
29 MONIES IN THE FUND ARE SUBJECT TO LEGISLATIVE APPROPRIATION AND DO NOT  
30 REVERT TO THE STATE GENERAL FUND.

31 B. THE DEPARTMENT SHALL USE THE COLLABORATIVE CARE UPTAKE FUND  
32 MONIES TO MAKE GRANTS TO PRIMARY CARE PHYSICIANS WHO ARE IN A MEDICAL  
33 PRACTICE WITH NOT MORE THAN FIFTY EMPLOYEES TO MEET THE INITIAL COSTS OF  
34 ESTABLISHING AND DELIVERING BEHAVIORAL HEALTH INTEGRATION SERVICES THROUGH  
35 THE COLLABORATIVE CARE MODEL AND FOR TECHNICAL ASSISTANCE GRANTS PURSUANT  
36 TO SECTION 36-3453.

37 C. A PRIMARY CARE PHYSICIAN THAT RECEIVES A GRANT UNDER THIS  
38 SECTION MAY USE THE GRANT MONIES:

39 1. TO HIRE STAFF.

40 2. TO IDENTIFY AND FORMALIZE CONTRACTUAL RELATIONSHIPS WITH OTHER  
41 HEALTH CARE PRACTITIONERS, INCLUDING HEALTH CARE PRACTITIONERS WHO WILL  
42 FUNCTION AS PSYCHIATRIC CONSULTANTS AND BEHAVIORAL HEALTH CARE MANAGERS IN  
43 PROVIDING BEHAVIORAL HEALTH INTEGRATION SERVICES THROUGH THE COLLABORATIVE  
44 CARE MODEL.

45 3. TO PURCHASE OR UPGRADE SOFTWARE AND OTHER RESOURCES NEEDED TO  
46 APPROPRIATELY PROVIDE BEHAVIORAL HEALTH INTEGRATION SERVICES THROUGH THE

1 COLLABORATIVE CARE MODEL, INCLUDING RESOURCES NEEDED TO ESTABLISH A  
2 PATIENT REGISTRY AND IMPLEMENT MEASUREMENT-BASED CARE.

3 4. FOR ANY OTHER PURPOSES THE DEPARTMENT PRESCRIBES AS NECESSARY TO  
4 SUPPORT THE COLLABORATIVE CARE MODEL.

5 36-3453. Collaborative care technical assistance center  
6 grants; purposes

7 A. THE DEPARTMENT SHALL SOLICIT PROPOSALS FROM AND ENTER INTO GRANT  
8 AGREEMENTS WITH ELIGIBLE COLLABORATIVE CARE TECHNICAL ASSISTANCE CENTER  
9 APPLICANTS TO PROVIDE TECHNICAL ASSISTANCE TO PRIMARY CARE PHYSICIANS ON  
10 PROVIDING BEHAVIORAL HEALTH INTEGRATION SERVICES THROUGH THE COLLABORATIVE  
11 CARE MODEL. EACH COLLABORATIVE CARE TECHNICAL ASSISTANCE CENTER APPLICANT  
12 MUST PROVIDE IN THE GRANT APPLICATION INFORMATION ON HOW THE COLLABORATIVE  
13 CARE TECHNICAL ASSISTANCE CENTER WILL MEET THE ASSISTANCE REQUIREMENTS  
14 PRESCRIBED IN SUBSECTION B OF THIS SECTION IN ORDER TO BE ELIGIBLE FOR A  
15 GRANT.

16 B. A COLLABORATIVE CARE TECHNICAL ASSISTANCE CENTER THAT RECEIVES A  
17 GRANT UNDER THIS SECTION SHALL PROVIDE TECHNICAL ASSISTANCE TO PRIMARY  
18 CARE PHYSICIANS AND SHALL ASSIST THE PRIMARY CARE PHYSICIANS WITH THE  
19 FOLLOWING:

20 1. DEVELOPING FINANCIAL MODELS AND BUDGETS FOR PROGRAM LAUNCH AND  
21 SUSTAINABILITY BASED ON PRACTICE SIZE.

22 2. DEVELOPING STAFFING MODELS FOR ESSENTIAL STAFF ROLES, INCLUDING  
23 CARE MANAGERS AND CONSULTING PSYCHIATRISTS.

24 3. PROVIDING INFORMATION TECHNOLOGY EXPERTISE TO ASSIST WITH  
25 BUILDING THE MODEL REQUIREMENTS INTO ELECTRONIC HEALTH RECORDS, INCLUDING  
26 ASSISTANCE WITH CARE MANAGER TOOLS, PATIENT REGISTRY, ONGOING PATIENT  
27 MONITORING AND PATIENT RECORDS.

28 4. PROVIDING TRAINING SUPPORT FOR ALL KEY STAFF AND OPERATIONAL  
29 CONSULTATION TO DEVELOP PRACTICE WORKFLOWS.

30 5. ESTABLISHING METHODS TO ENSURE THE SHARING OF BEST PRACTICES AND  
31 OPERATIONAL KNOWLEDGE AMONG PRIMARY CARE PHYSICIANS WHO PROVIDE BEHAVIORAL  
32 HEALTH INTEGRATION SERVICES THROUGH THE COLLABORATIVE CARE MODEL.

33 6. FOR ANY OTHER PURPOSES THE DEPARTMENT PRESCRIBES AS NECESSARY TO  
34 SUPPORT THE COLLABORATIVE CARE MODEL.

35 Sec. 2. Appropriation; collaborative care uptake fund;  
36 exemption

37 A. The sum of \$1,000,000 is appropriated from the state general  
38 fund in fiscal year 2023-2024 to the collaborative care uptake fund  
39 established by section 36-3452, Arizona Revised Statutes, as added by this  
40 act, and is appropriated from the collaborative care uptake fund to the  
41 department of health services.

42 B. The appropriation made in subsection A of this section is exempt  
43 from the provisions of section 35-190, Arizona Revised Statutes, relating  
44 to lapsing of appropriations.