

POLICY GA 3.7 REVIEW OF DEATHS OF ALL BEHAVIORAL HEALTH RECIPIENTS

- A. PURPOSE: To establish requirements for the T/RBHAs to review deaths of all behavioral health recipients and report findings to ADHS/DBHS.
- B. SCOPE: ADHS/DBHS and T/RBHAs. As applicable, T/RBHAs must ensure that all subcontracted providers, including the Arizona State Hospital, adhere to the requirements of this policy.
- C. POLICY: All deaths of behavioral health recipients shall be reviewed by the T/RBHA and reported to ADHS/DBHS Bureau of Quality Management Operations, Office of Medical Management. All deaths are reviewed by the ADHS/DBHS Medical Director or designee and selected cases are referred to the ADHS/DBHS Morbidity and Mortality Committee for further review and potential action, in accordance with ADHS/DBHS' established quality assurance process.
- D. REFERENCES: [42 C.F.R. § 438.240](#)
[A.A.C. R9-20-111](#)
[A.A.C. R9-21-101\(B\)\(1\)](#)
[A.A.C. R9-21-203\(B\)\(3\)](#)
[A.R.S. § 36-2401 et seq.](#)
[A.R.S. § 36-2917](#)
[A.R.S. § 36-445](#)
[ADHS/DBHS Policy and Procedures QM 2.5, Reports of Incidents, Accidents and Deaths](#)
- E. DEFINITIONS:
1. Abuse

The infliction of, or allowing another person to inflict or cause, physical pain or injury, impairment of bodily function, disfigurement or serious emotional damage which may be evidenced by severe anxiety, depression, withdrawal or untoward aggressive behavior. Such abuse may be caused by acts or omissions of an individual having responsibility for the care, custody or control of a client receiving behavioral health services or community services. Abuse shall also include sexual misconduct, assault, molestation, incest, or prostitution of, or with, a client under the care of personnel of a mental health agency.
 2. Behavioral Health Recipient

Any adult or child that receives services in/through ADHS/DBHS funded programs, and who may or may not be enrolled.
 3. Enrolled Person

A Title XIX/XXI or Non-Title XIXI/XXI eligible person recorded in the ADHS Information System

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as specified by ADHS.

4. Exploitation

The illegal use of a client's resources for another individual's profit or advantage according to A.R.S. Title 46, Chapter 4 or Title 13, Chapter 18, 19, 20, or 21.

5. Neglect

A pattern of conduct resulting in deprivation of food, water, medication, treatment, medical treatment, medical services, shelter, cooling, heating, or ancillary services necessary to maintain minimum physical or behavioral health.

6. Peer Review

An in-depth review specifically intended to investigate the clinical soundness of treatment provided for an individual consumer by a clinician (e.g. medical doctor, nurse practitioner, physician assistant), typically conducted through a committee structure inclusive of same-specialty peers. The peer review process is confidential and is not disclosed as public record or produced in response to a subpoena or other legal order unless otherwise required by law.

7. Protected Health Information

Information regarding a currently or previously enrolled person including: name, address, date of birth, social security number, tribal enrollment number, telephone or facsimile number, driver's license number, places of employment or school identification or military identification number or any other distinguishing characteristic that allows identification of a particular person.

F. PROCEDURES:

1. T/RBHAs shall prepare and submit, to ADHS/DBHS, a written summary of their review for all deaths of behavioral health recipients, using the [Mortality Review Form](#), contained in the [Performance Improvement Specification Manual, No. 10](#). T/RBHAs may permit subcontracted providers to prepare and submit a written summary of their review of deaths for adult, Non-SMI behavioral health recipients using the [Mortality Review Form](#).
2. If the cause of death is determined to be suicide, homicide, drug overdose, exposure, accident, suspected abuse/neglect, or unexpected/unusual medical causes, or upon the request of ADHS/DBHS, the T/RBHA shall also complete the ADHS/DBHS Mortality Review Addendum Section of the [Mortality Review Form](#), regardless of whether the behavioral health recipient is a child, adult with a Serious Mental Illness or adult without a Serious Mental Illness.
3. The T/RBHAs shall ensure that the [Mortality Review Form](#) is:
 - a. Completed following the T/RBHAs' established review process. This process should:

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- (1) Ensure the [Mortality Review Form](#) is complete and contains accurate information;
 - (2) Ensure that clinical/medical review is conducted as indicated for the [Mortality Review Form](#);
 - (3) Ensure that formal investigations or Peer Review are initiated when appropriate, as determined by the T/RBHA Medical Director or as requested by the ADHS/DBHS Medical Director.
- b. Reviewed and signed by the T/RBHA Medical Director or designee. It is the expectation that the T/RBHA Medical Director, or designee will confirm, based upon the particular situation of the consumer, that all necessary information has been reviewed. More specifically, each case should be assessed to determine if appropriate behavioral health services have been offered or provided based upon the clinical presentation of the behavioral health recipient. When indicated, case-specific follow-up actions or formal corrective action plans (if trends are suspected) must be outlined.
- c. Submitted to the ADHS/DBHS Bureau of Quality Management Operations, Office of Medical Management no later than 60 calendar days following receipt by the T/RBHA of the [Incident/Accident/Deaths Report Form PM 7.4.1](#) completed pursuant to [ADHS/DBHS Policy and Procedure QM 2.5, Reports of Incidents, Accidents and Deaths](#).
4. ADHS/DBHS shall provide the completed [Mortality Review Form](#), including the Mortality Review Addendum Section when applicable, to the Center for Disability Law, the Arizona Protection and Advocacy Organization, as follows:
- a. Copies of the [Mortality Review Form](#) received during any given month shall be provided with all protected health information removed within 5 working days after the end of the month.
 - b. If the Arizona Protection and Advocacy Organization asserts in writing that probable cause of abuse or neglect of a deceased person exists, or that the organization has received a complaint regarding the case of a deceased person, ADHS/DBHS shall provide copies of all documents contained in the ADHS/DBHS Mortality File and Investigation File, if any, including protected health information. Such documents shall be made available to the Arizona Protection and Advocacy Organization within one working day of the request.
5. ADHS/DBHS Bureau of Quality Management Operations, Office of Medical Management shall:
- a. Review all Mortality Review Forms to determine if:
 - (1) The [Mortality Review Form](#) is completed as required. If required information is missing, the [Mortality Review Form](#) shall be returned to the T/RBHA for completion.
 - (2) Supplemental information is needed to ascertain whether additional investigation is

