

Welcome to AHCCCS Community Forum

While you are waiting TEST YOUR AUDIO.

LISTEN FOR MUSIC.

You were automatically muted upon entry.

Please only join by phone or computer.

Please use the chat feature for questions or raise your hand.

Thank you.



National 24-Hour Crisis Hotlines

Phone

- 988 Suicide & Crisis Lifeline: **988**
- National Substance Use and Disorder Issues Referral and Treatment Hotline: **1-800-662-HELP (4357)**

Text

- Send a Text to **988**
- Text the word "HOME" to **741741**

Chat

- **988 Lifeline Chat**

Videophone

- Select **ASL NOW** at the bottom of the page to connect with a 988 Lifeline counselor.



Arizona Crisis Hotlines by County

Local Suicide and Crisis Hotlines by County

Phone

Maricopa, Pinal, Gila Counties served by Mercy
Care: **1-800-631-1314** or **602-222-9444**

Cochise, Graham, Greenlee, La Paz, Pima, Santa Cruz and Yuma
Counties served by Arizona Complete Health: **1-866-495-6735**

Apache, Coconino, Mohave, Navajo and Yavapai Counties served
by Care1st: **1-877-756-4090**

Gila River and Ak-Chin Indian Communities: **1-800-259-3449**

Especially for Teens

Teen Lifeline phone or text: **602-248-TEEN (8336)**



How to access the crisis line in your area

Statewide:

Call: 1-844-534-HOPE (4673), Text: 4HOPE (44673) or

Chat: [Solari Crisis Response Network](#)

North GSA

- **Counties: Coconino, Mohave, Navajo, Yavapai:**
Health Choice Arizona: **1-877-756-4090**

Central GSA

- **Maricopa County, Pinal, Gila:** Mercy Care **1-800-631-1314**

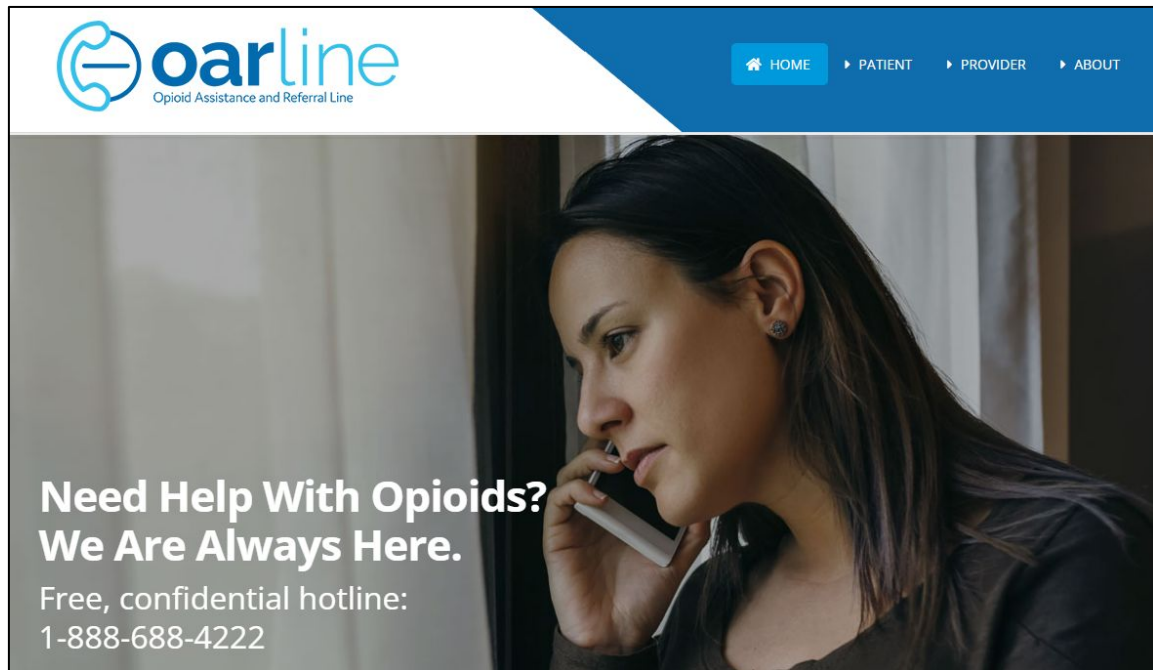
South GSA

- **Counties: Apache, Cochise, Graham, Greenlee, La Paz County, Pima, Santa Cruz, Yuma:**
Arizona Complete Health - Complete Care Plan **1-866-495-6735**

Tribal

- **Ak-Chin Indian Indian Community:**
1-800-259-3449
- **Gila River Indian Community:**
1-800-259-3449
- **Salt River Pima Maricopa Indian Community:**
1-855-331-6432
- **Tohono O'odham Nation:**
1-844-423-8759

OARLine

The image shows a screenshot of the OARLine website. At the top left is the OARLine logo, which consists of a blue circular icon with a white telephone handset inside, followed by the text "oarline" in a lowercase, sans-serif font, and "Opioid Assistance and Referral Line" in a smaller font below it. To the right of the logo is a blue navigation bar with white text and arrows pointing right, containing the links "HOME", "PATIENT", "PROVIDER", and "ABOUT". Below the navigation bar is a large photograph of a woman with long dark hair, wearing a dark jacket, talking on a white mobile phone. In the bottom left corner of the photograph, there is white text that reads: "Need Help With Opioids? We Are Always Here. Free, confidential hotline: 1-888-688-4222".

oarline
Opioid Assistance and Referral Line

HOME ▶ PATIENT ▶ PROVIDER ▶ ABOUT

**Need Help With Opioids?
We Are Always Here.**
Free, confidential hotline:
1-888-688-4222

www.azdhs.gov/oarline

Email:

AzOarline@gmail.com

Members: Make Sure Your Contact Info Is Current In Health-e-Arizona PLUS

Need to report a change?

The screenshot shows the Health-e-Arizona PLUS website interface. The 'I Want To...' menu on the left has 'Report a Change' highlighted with a red box. The 'My Account' section shows a verified user with address 701 E Jefferson St, Phoenix, AZ, 85034-2215. The 'My Medical Assistance' table shows one entry: AHCCCS Medical Assistance, beginning 09/01/2021. The 'My Applications' section shows one submitted application with number 2021272000237, dated 9/30/2021.

| Name | Program | Begin Date | End Date |
|------|---------------------------|------------|----------|
| | AHCCCS Medical Assistance | 09/01/2021 | |

| Application Number | Date Started | Date Sent | Status | View |
|--------------------|--------------|--------------|-----------|--|
| 2021272000237 | 9/30/2021 | MA 9/30/2021 | Submitted | Provide/View Documents View Application Summary |

The banner features a blue background with a laptop displaying the website. The text reads: 'UPDATE YOUR INFORMATION TODAY! Make sure your contact information is up to date so AHCCCS can contact you, if needed.' The URL www.healtharizonaplus.gov is shown at the top. The AHCCCS logo is at the bottom left. The laptop screen shows a notification about COVID-19 and a section for 'INDIVIDUAL AND FAMILY'.

Log in or create an account today at www.healtharizonaplus.gov

Health-e-Arizona PLUS Address Changes

Address changes can be reported online using Health-e-Arizona PLUS.

Report a Change

- New Contact Information
- Update Address Confidentiality Program (ACP) Enrollment
- Add Person(s) - Someone Moved in or Had a Baby
- Remove Person(s) - Someone Moved Out or is Deceased
- Household Moved or Will Move
 - Moved Within Arizona
 - Moved Out of Arizona
- Update Information About a Person(s)
- Update Tax Filing Information
- Income Changed
- Expenses Changed
- Apply for another program
- Disability Changed
- Update Alternative Format

You can tell us the change here, but there will be a delay to process the potential change in benefits.

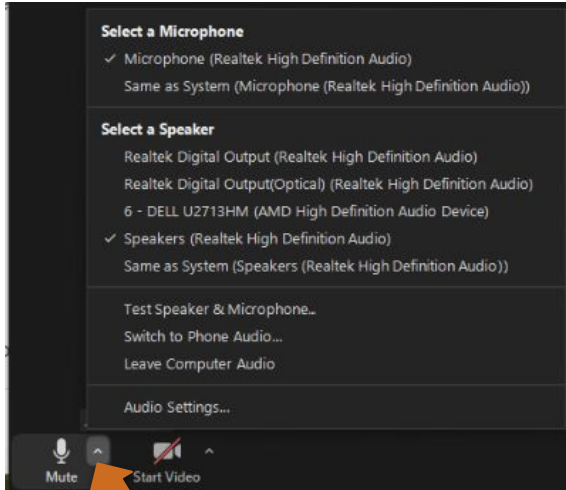
- Other Change

[← Previous](#) [Next →](#)

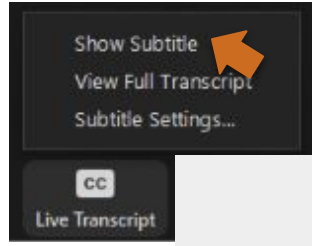
Zoom Webinar Controls

Navigating your bar on the bottom...

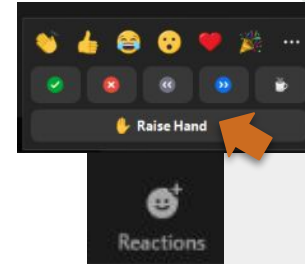
Audio Settings



Turn on Closed Captioning



Raise Hand



Chat



KEYBOARD SHORTCUTS TO RAISE HAND

Windows: Alt+Y to raise or lower your hand

Mac: Option+Y to raise or lower your hand

This Meeting Is Being Recorded

The recording shall be the sole property of AHCCCS and participation in this meeting indicates your waiver of any and all rights of publicity and privacy.

Please disconnect from this meeting if you do not agree to these terms.

Waiver Re-Entry

Maxwell Seifer

Federal Relations Manager



Section 1115 of the Social Security Act

- Allows states the flexibility to design Demonstration projects that promote the objectives of the Medicaid program,
- Demonstration projects are typically approved for a five-year period and can be renewed every five years, and
- Must be budget neutral, meaning that federal spending under the waiver cannot exceed what it would have been in absence of the waiver.

1115 Re-Entry Waiver

Reentry Services Overview

- On December 27, 2024, CMS granted approval to provide limited coverage for services furnished to a subset of incarcerated individuals for up to 90 days immediately prior to their expected dates of release.
- This approval also provides expenditure authority to the state to provide non-medical transportation (NMT) to and from health-related social needs (HRSN) services and home and community-based services (HCBS) for Arizona Long Term Care System (ALTCS) eligible beneficiaries.

1115 Re-Entry Waiver

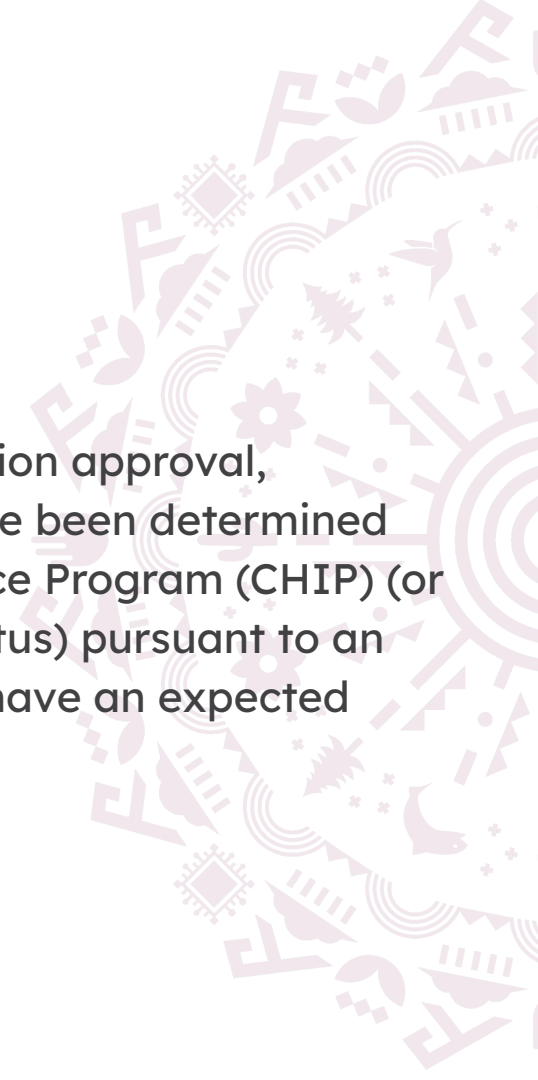
Reentry Services (Cont'd)

- Demonstration Initiative Goals
 - Increase coverage, continuity of coverage, and appropriate service uptake
 - Improve access to services
 - Improve coordination and communication
 - Increase additional investments in health care and related services
 - Improve connections between carceral settings and community services
 - Reduce all-cause deaths and reduce number of ED visits and inpatient hospitalizations
 - Provide intervention for certain behavioral health conditions

1115 Re-Entry Waiver

Reentry Services (Cont'd)

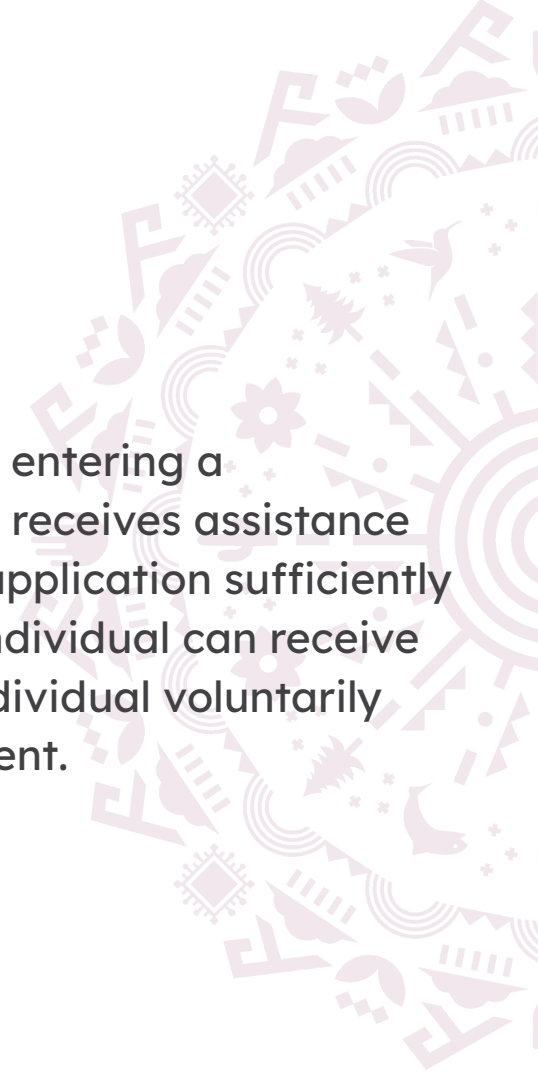
- Eligibility
 - To qualify for services covered under this demonstration approval, individuals residing in a correctional facility must have been determined eligible for Medicaid or the Children's Health Insurance Program (CHIP) (or be eligible for CHIP except for their incarceration status) pursuant to an application filed before or during incarceration, and have an expected release date within 90 days.



1115 Re-Entry Waiver

Reentry Services (Cont'd)

- Eligibility
 - For individuals not enrolled in Medicaid or CHIP upon entering a correctional facility, Arizona will ensure the individual receives assistance with completing and submitting a Medicaid or CHIP application sufficiently prior to their anticipated release date such that the individual can receive the full duration of pre-release services, unless the individual voluntarily refuses such assistance or chooses to decline enrollment.



1115 Re-Entry Waiver

Reentry Services (Cont'd)

- Participating Facilities
 - Jails
 - Prisons
 - Youth Correctional Facilities
 - Tribal Correctional Facilities



1115 Re-Entry Waiver

Reentry Services (Cont'd)

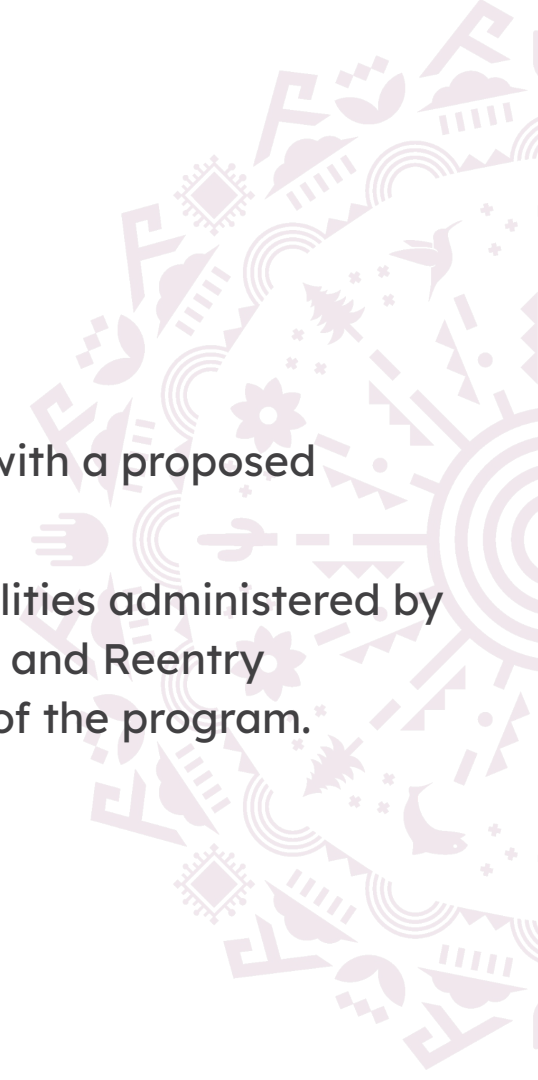
- Covered Services
 - Case Management
 - Medication Assisted Treatment (MAT) Services
 - 30-day Supply of Prescription Medications
 - Practitioner Office Visit
 - Peer Support Services



1115 Re-Entry Waiver

Reentry Services (Cont'd)

- Next Steps
 - AHCCCS will establish a timeline for implementation with a proposed effective go-live date of October 1, 2026.
 - AHCCCS will begin the demonstration with prison facilities administered by the Arizona Department of Corrections Rehabilitation and Reentry (ADCRR), these facilities will make up the first phase of the program.



CAA Re-Entry Initiative

Consolidated Appropriations Act (CAA 2023)

As part of the Consolidated Appropriations Act, 2023, section 5121 adds requirements for a certain set of services for Medicaid and CHIP juvenile beneficiaries who are incarcerated. This includes:

- A Medicaid eligible individual who is under 21 years of age, and individuals between the ages of 18 and 26 who is eligible for Medicaid under the former foster care children group.

CAA Re-Entry Initiative

Consolidated Appropriations Act (CAA 2023) cont.

- Under section 5121, state Medicaid and CHIP programs are required to offer the following:
 - Screening and diagnostic services: In the 30-days prior to release, or within one week or as soon as practicable after release, juveniles must receive screening and diagnostic services (including behavioral health screenings) in accordance with EPSDT requirements.
 - Targeted Case Management: In the 30-days prior to release and for at least 30-days following release

CAA Re-Entry Initiative

Consolidated Appropriations Act (CAA 2023) cont.

- States are required to have in place an internal operational plan detailing how the State will reach compliance by 1/1/25.
- This internal operational plan will be partnered with a SPA holding a 1/1/25 effective date. The SPA will:
 - Attest to meeting the above requirements
 - Authorize coverage of Targeted Case Management for this population
- CAA Reentry is expected to go-live in a subset of facilities on 10/1/2025.



Questions?



Arizona Youth Focus Groups: Mental Health in Schools

Katie Tacey

Program Coordinator: Behavioral Health in Schools

Children's System of Care

Division of Integrated Health & Housing

Amplifying Youth Voices in Mental Health Services

Mission: To amplify the voices of Arizona's youth by understanding their experiences and needs, ensuring their input shapes equitable and accessible mental health services in school.

Vision: A statewide system where all youth feel heard, supported, and empowered to access stigma-free mental health services in safe school environments.

“The youth are the beating heart of social transformation.”

- Nelson Mandela

Ensuring Diverse Representation

Age/Grade Level*

- Middle School (6–8)
- High School (9–12)

Geographic Region

- Rural
- Urban/Remote
- Tribal Communities

Socioeconomic Status

- Free/reduced lunch eligibility

Race/Ethnicity

- Reflect Arizona's population statistics

Gender/Sexuality Identity*

- Inclusive of LGBTQ+ and non-binary youth

Special Populations

- Cognitive/Physical Disabilities*
- Foster care
- McKinney-Vento
- Juvenile Justice System*

Key Question: How can we ensure focus groups reflect Arizona's youth demographics?

* separate focus group

Creating Safe and Effective Sessions

Structure:

- Pre-session orientation with trauma-informed practices
- Sessions led by trained facilitators (youth-led where possible) with adult support (Affinity led when appropriate).
- 5–6 youth per group
- Post - Session Supports

Logistics:

- Parental consent required
- Incentives for participation

Key Question: What are best practices for empowering youth while ensuring safety?

Defining Success and Moving Forward

Metrics:

- Representation: Participation rates by demographic
- Insights: Actionable themes and recommendations identified
- Impact: Policy changes influenced by youth input

Next Steps:

- Finalize facilitator training framework
- Identify and secure key advocates and partners
- Launch pilot focus groups by end of 24/25 school year

Key Question:
What additional success metrics should we consider, and how can we sustain long-term youth engagement?



Closing Questions

- How can we best identify and invite youth participants?
- What are effective methods to empower youth during sessions?
- Who should we connect with to support and facilitate this initiative?

Contact Information: Katie Tacey | katietacey@azahcccs.gov

Thank You!

Paxis Tools Update

Jeanette Puskas





pax

In Arizona



PAX Across the System of Care



Using a trauma-informed approach

Teaching behavior as a skill set

Creating a Nurturing Environment

Establishing reliable and consistent adults



PAX programming provides evidence-based strategies for all adults who work with or care for young people.

PAX can be integrated for daily use at school, in the community, or at home and provides improved behavioral, academic and lifetime outcomes for young people and improved workforce development and caregiver skills for caring adults.



Statewide school- and
community-based initiative



The Need for Population-level Prevention

- In the years leading up to the initiative:
 - Thousands of suspected opioid overdoses
 - Inequitable access to prevention strategies
 - Overstressed and underprepared workforce
 - All amplified with the onset of the pandemic and quarantine

Fruth, J., Irving, C., Fechner, A., & Embry, D. (2024). Population-level PAX: Prevention programming across the youth system of care. *Journal of Education and Social Policy*, 11(1).



JOHNS HOPKINS
UNIVERSITY

Over 50 independent studies confirm an array of proximal and distal outcomes, including reductions in mental, emotional, and behavioral disorders.



PAX programming provided trauma-informed, evidence-based programming in schools and the community:

- Increased high school graduation and college entrance
- Reduced risk of mental, emotional, and behavioral disorders
- Decreased opioid and other drug misuse
- Decreased suicide

System of Care Approach

- AHCCCS supported implementing PAX across the youth system of care
- Educators, Human Service Professionals, Youth Development Professionals, Parents and Caregivers
- Trauma-informed evidence-based prevention at population level
- Including tribal, rural, and under-resourced populations



Fruth, J., Irving, C., Fechner, A., & Embry, D. (2024). Population-level PAX: Prevention programming across the youth system of care. *Journal of Education and Social Policy*, 11(1).



Trauma informed

Evidence based

Culturally
responsive

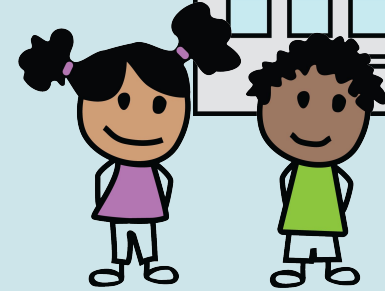
PAX Tools[®] is a set of strategies that utilize Evidence-based Kernels to improve cooperation and relationships among children and adults.

PAX Tools strategies promote self-regulation and result in reduced conflict, improved climate, and decreased risk for mental, emotional, and behavioral disorders.

Who can implement PAX Tools Strategies?

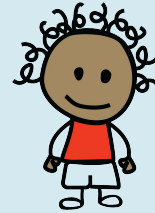
- ❖ Parents / Caregivers
- ❖ Foster Parents
- ❖ Out-of-school Time Staff
- ❖ Childcare Providers
- ❖ Counselors / Clinicians
- ❖ Faith Based Staff / Volunteers
- ❖ Youth Workers





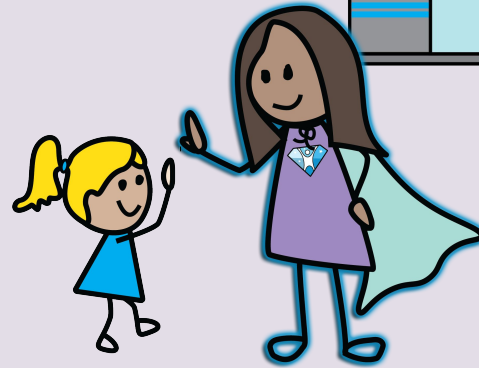
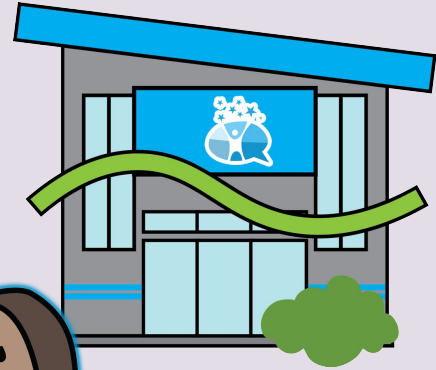
Counselors, Therapists, Behavioral Health Professionals

Human service professionals learned universal trauma-informed, evidence-based strategies to integrate into their daily practice with young people receiving care.



Youth Development Professionals, Full-time and Administrative Out-of-School Time Staff

Out-of-School time professionals learned trauma-informed, evidence-based strategies for working with youth in camp and after-school settings.



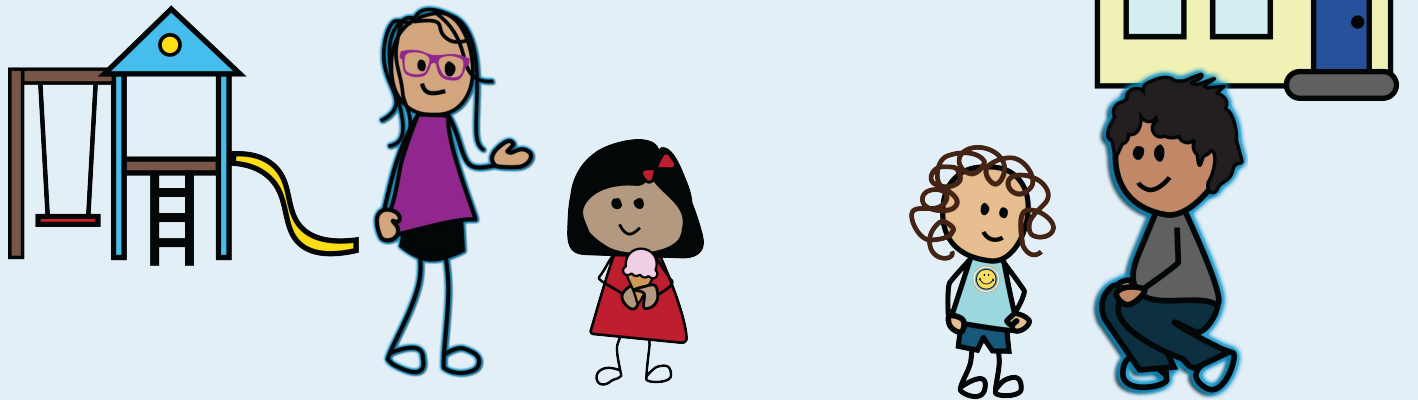
Youth Workers, Early Career and Entry-level Out-of-School Time Staff

Youth Workers learned trauma-informed, evidence-based strategies for their work with youth in recreational and after-school settings.



Parent Educators, Health Educators, Community Educators

Community-based educators who work with families and caregivers learned trauma-informed evidence-based strategies to integrate into their workshops and support of families.



Foster Parents and Caregivers, Kinship Caregivers, Adoptive Parents and Grandparents

Parents and caregivers of children in care learned trauma-informed, evidence-based strategies for providing care for children in the home.



100%

Look to stay in the youth work field after using PAX Tools

– *AZ PAX Tools for Youth Workers 2019-2024*

“I think it will be well received by the families we serve in our rural community. The information is clear and the recipe for each strategy/tool is easy to follow step-by-step.”

- *PAX Tools for Community Educators*

Outcomes and Benefits

100%

confident in using PAX Tools with the young people they work with

– *PAX Tools for Youth Workers*

99%

PAX Tools strategies are appropriate for the children in their care

– *PAX Tools for Caregivers*

89%

noticed improvements in their own well-being since using PAX Tools

- *PAX Tools for Human Services*



Increased academic performance

Improve behavioral outcomes

Improve lifetime outcomes

The **PAX Good Behavior Game**[®] utilizes Evidence-based Kernels to teach **self-regulation** and **positive behavior** as a skill set.

Teachers implement the *evidence-based* **PAX Good Behavior Game** through typical classroom procedures.

What is the PAX Good Behavior Game?

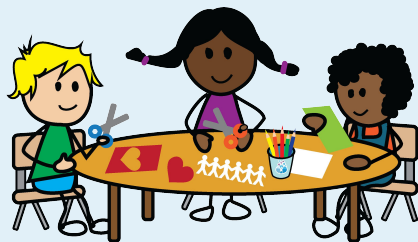
Classrooms using **The PAX Good Behavior Game**

increase regulation and pro-social behavior and
decrease problematic behavior and psychiatric symptoms.

These effects produce

- ❖ Approximately one additional hour of **learning time** each day.
- ❖ Approximately a 75% reduction in **problematic behaviors**.
- ❖ A significant increase in **standardized test scores**.
- ❖ A significant reduction in **teacher stress and burnout**.

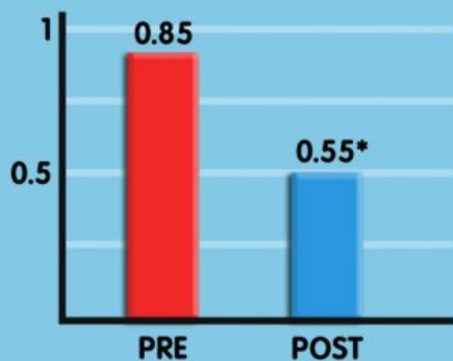




Classroom Teachers, Administrators, Paraprofessionals, and Educational Support Staff

Educators learned to implement the trauma-informed, evidence-based practice that is the gold standard in school-based prevention.

Reduction in symptoms of depression
for children in PAX classrooms



Reduction in off-task, inattentive
behaviors for children in PAX classrooms



Outcomes and Benefits

99%

PAX GBG works well with existing
schoolwide initiatives

98%

confident using PAX with children with
behavioral needs

82%

students need fewer corrections during
the day

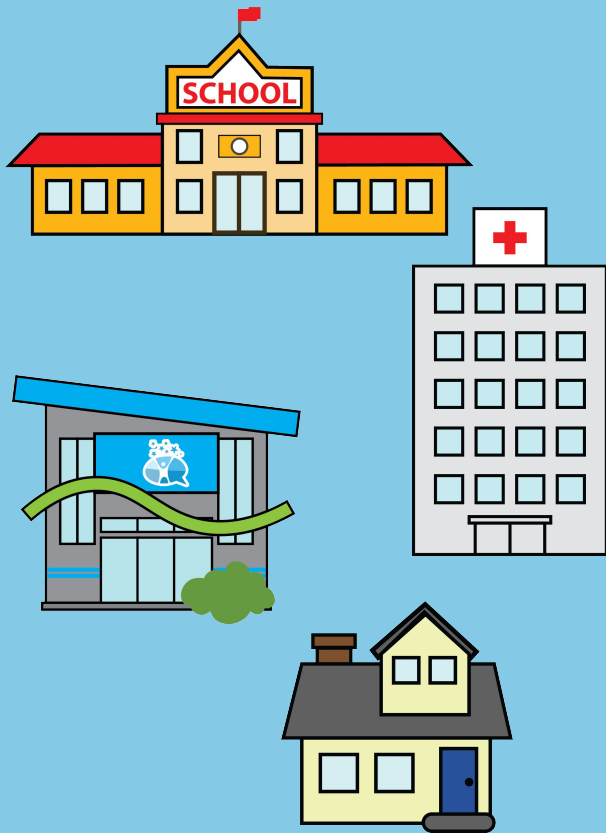


Chinle Unified School District



**Classroom-based universal
prevention across grades
K-12**

- 328 educators trained in PAX Good Behavior Game in summer 2023
- Campus-wide professional development 2024
- Parent/Caregivers received PAX training in fall 2024
- Programming consistent with school-wide initiatives such as PBIS and MTSS
- Programming supports the unique needs of the Indigenous community and honors their cultural wisdom



PAX Programming in Residential Care

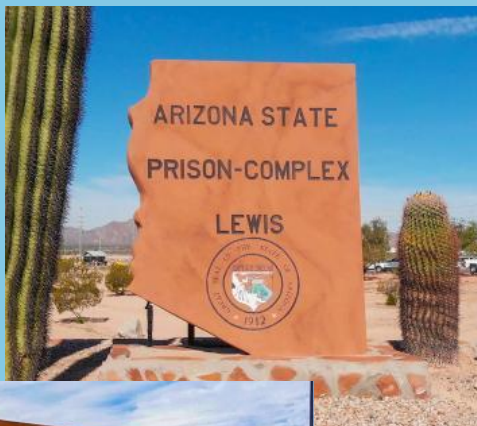
Congregate Care Red Hawk Ranch, Lakeside, AZ

- Residential/Congregate Care site in Arizona
- Trained each level of the organization in PAX Tools
- Supported PAX outside of the organization including schools and reunification
- Improved outcomes for youth and staff
- Seek to implement a uniform approach to improve outcomes for children in care
- Obtained QRTP and CARF accreditation

**Manuscript under review*

AZ Dept. of Corrections Bachman & Manzanita Units

- Trained RSSs as PAX Tools Community Educators
- Onsite training in trauma-informed strategies for use in their work in mentoring residents
- RSSs implementing PAX Tools in daily responsibilities and group meetings
- RSSs provide PAX Tools Workshops to peers upon re-entry
- Residents equipped with trauma-informed strategies for use with their families upon reunification



**Universal Prevention with
Selected and Indicated
audiences through
Corrections Residents**



10,110

**Arizona
Professionals
trained since
2019**

Prevention Next Steps

Diverse programming has met unique needs:

- Academic and behavioral outcomes in schools,
- Operationalizing Trauma-informed Care in facilities,
- Effective strategies for caregivers in homes,
- First-time access for frontline youth-facing professionals,
- Equitable access for rural and tribal audiences,
- Workforce Development across the System of Care

How do we engage additional sectors in supporting and funding prevention + employee retention, productivity, and satisfaction outcomes?

New for 2025!



Take No-Cost PAX Training → Earn Credit Hours!

**PAX Training is approved by the
Arizona Early Childhood Career and
Professional Development Network
for Continuing Education hours!**



Want No Cost PAX Training?



AHCCCS
Arizona Health Care Cost Containment System

PAXIS Institute
an international prevention science leader

Want no-cost **pax** training?



Scan now to register
for a PAX training!

Email info@paxis.org to schedule PAX training for your group!





Questions?

Follow & Support AHCCCS on Social Media

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YouTube

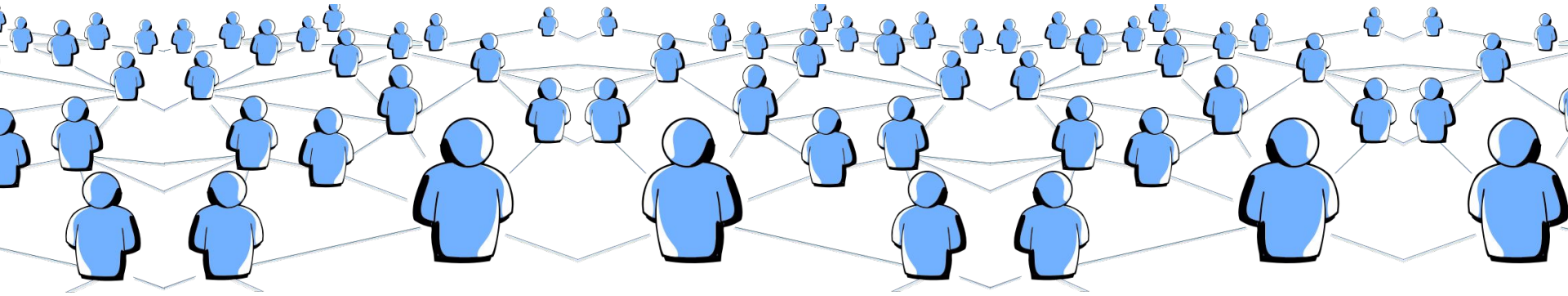
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[@AHCCCS](https://www.linkedin.com/company/AHCCCS)

[AHCCCSgov](https://www.youtube.com/AHCCCSgov)



Upcoming AHCCCS Community Events

- Community Policy
 - 2/10/25
 - [Register](#)
- AHCCCS Hot Topics
 - 2/24/25
 - [Register](#)
- Jacob's Law
 - 2/27/25
 - [Register](#)



Learn about AHCCCS' Medicaid Program on YouTube!

AHCCCS
Explains...

Medicaid Eligibility

AHCCCS
Explains...

ALTCS

AHCCCS
Explains...

Health-e-Arizona Plus



Other Resources - Quick Links

- AHCCCS [Waiver](#)
- AHCCCS [State Plan](#)
- AHCCCS [Grants](#)
- AHCCCS [Whole Person Care Initiative \(WPCI\)](#)
- AHCCCS [Office of Human Rights](#)
- AHCCCS [Office of Individual and Family Affairs](#)



*Please take the survey
to help us better tailor
meetings to
meet your needs.*

Thank you!

