



# Statewide Collaborative Protocols

Established through the Interagency Service Agreement (ISA) between AHCCCS and ADES/RSA

Developed in partnership with:



**Note:** *The Statewide Collaborative Protocols shall automatically renew on an annual basis and will only be amended as necessary to support the Interagency Service Agreement between ADES/RSA and AHCCCS.*

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The Interagency Service Agreement (ISA) between the Arizona Department of Economic Security/Rehabilitation Services Administration (ADES/RSA) and the Arizona Health Care Cost Containment System (AHCCCS) is a third-party cooperative agreement, as defined by the Rehabilitation Act of 1973, as amended, and its implementing Regulations 34 CFR 361.28, for providing enhanced and structured Vocational Rehabilitation (VR) services available to all individuals with **Serious Mental Illness (SMI)** designations.

The purpose of this Agreement is to enhance the ability of individuals with SMI designations to take their rightful places as participating members of the workforce and in their communities by increasing the number of employed mutually enrolled individuals who are satisfied with their vocational roles and environments. The RSA/VR program provides a variety of services to persons with disabilities, with the ultimate goal to prepare for, enter into, and retain employment.

### **Release of Information (ROI) / HIPAA**

AHCCCS, the Managed Care Organizations (MCOs), and MCO Provider Organizations may share verbal and written information with ADES/RSA regarding members who may be referred to or are eligible for RSA/VR services without a signed ROI. This may include, but not limited to, the following:

- Verbal Communication
- Providing an individual's referral packet
- Participation with the behavioral health team to coordinate care

Services for members must not be delayed due to any agency's requirements for a signed ROI. This applies to both behavioral health and RSA/VR.

Note: Releasing information regarding HIV status and treatment for alcohol or drug abuse must follow Federal Law. For additional information, refer to the ISA found at: <https://www.azahcccs.gov/PlansProviders/HealthPlans/purchasing.html> within the tab titled "Other Agreements/Contracts".

### **Co-Location of VR Counselors**

The purpose of co-location is for coordination of care between RSA/VR staff and Provider staff. RSA/VR staff must utilize co-location to conduct VR Orientations (group and individual), schedule client meetings, and participate in staffings and other meetings, when necessary. Provider staff should assist in scheduling VR Orientations, as well as invite RSA/VR staff to those other meetings when RSA/VR presence is needed.

1. RSA/VR Counselors are assigned to identified behavioral outpatient or integrated care health homes ("Providers") providing behavioral health services for individuals enrolled with an AHCCCS Complete Care-Regional Behavioral Health Agreement (ACC-RBHA) MCO and shall participate at the highest level possible at the assigned Provider site.
2. RSA/VR Counselors are to provide contact information and a schedule of the days/times of on-site availability. Virtual office hours should also be provided, if applicable.
3. Providers must make functional workspace available for RSA/VR staff at each assigned Provider location, including access to a confidential area when meeting with individuals, a desk, chairs, and a telephone. In this workspace, RSA/VR staff must have the capability to receive any site safety alerts. Computers and internet access may also be available.
4. Co-location by RSA/VR at any given assigned Provider location shall not be dependent on the presence of a Provider's designated employment personnel.
5. Provider staff must educate assigned RSA/VR staff of emergency/safety protocols, including but not limited to the following:
  - Signing in and out when entering and exiting the provider location,
  - Evacuation procedures,
  - Lockdown protocols,
  - Location of fire extinguishers,

- Site-specific emergency codes (e.g., verbal codes that specify emergency situations, such as “Code Blue”),
- Instructions for the site phone and intercom systems, and
- Any applicable and available site safety protocol training.

### VR Referral Process

#### **RSA/VR Group Orientations:**

RSA/VR Group Orientations are to be conducted for individuals to learn about the employment services offered through RSA/VR. RSA/VR Group Orientations must be scheduled at designated Provider sites at least once monthly and on a recurring basis for all members affiliated with the Provider. A minimum of one Provider staff must be present and is expected to be actively engaged during the sessions. RSA/VR and Provider staff will identify which method of Group Orientation will best suit the needs of their site (e.g., in-person, virtual, or hybrid).

The *VR Referral Feedback Form* will be completed for each individual that plans to attend the Group Orientation. See the VR Referral Feedback Form for more details. At the conclusion of all RSA/VR Group Orientations, individuals will be asked about applying for the VR program. **Only individuals choosing to apply for the VR program will be placed into Status 00.**

	<b>Provider Responsibility</b>	<b>RSA/VR Responsibility</b>
<b>Prior to Orientation</b>	<ul style="list-style-type: none"> <li>• Educate individuals about the RSA/VR program and purpose of the Orientations.</li> <li>• Promote upcoming RSA/VR Group Orientations and schedule interested individuals to attend.</li> <li>• Encourage attendance by offering reminders, arranging transportation, and discussing/ arranging disability-related accommodations, if needed.</li> <li>• Reserve functional space for RSA/VR staff to present.</li> <li>• Complete the top section of the <i>VR Referral Feedback Form</i> for each individual that plans to attend.</li> </ul>	<ul style="list-style-type: none"> <li>• Provide the <i>VR Referral Feedback Form</i> to Provider staff.</li> <li>• Provide a schedule of RSA/VR Group Orientations, including dates, times, and locations to the Provider to be posted in highly visible areas, such as the lobby.</li> <li>• Coordinate with Provider staff to determine method of presentation.</li> </ul>
<b>During Orientation</b>	<ul style="list-style-type: none"> <li>• Have a minimum of one Provider staff present to be actively engaged during the sessions.</li> <li>• Sign each <i>VR Referral Feedback Form</i>.</li> <li>• Complete <i>VR Referral Feedback Form</i> for walk-in attendees.</li> <li>• Collect <i>VR Referral Feedback Forms</i> for individuals who decline participation or no-show.</li> </ul>	<ul style="list-style-type: none"> <li>• Utilize the RSA/VR Orientation PowerPoint presentation.</li> <li>• Answer questions about the VR program.</li> <li>• Complete the bottom section and sign each <i>VR Referral Feedback Form</i>.</li> <li>• Collect <i>VR Referral Feedback Forms</i> <b>ONLY</b> for individuals choosing to apply for the VR program.</li> </ul>
<b>After Orientation</b>	<ul style="list-style-type: none"> <li>• Within 7 business days, provide RSA/VR with a referral packet (ONLY for individuals who want to apply for the RSA/VR program).</li> <li>• If an individual declines participation, meet to discuss alternative options/services.</li> <li>• If an individual no-shows, follow up to re-engage with RSA/VR.</li> <li>• Enter all completed <i>VR Referral Feedback Forms</i> into the individuals’ respective medical records.</li> </ul>	<p>For individuals choosing to apply for the RSA/VR Program:</p> <ul style="list-style-type: none"> <li>• Request a referral packet from the Provider.</li> <li>• Scan the VR Referral Feedback Form into the RSA Case Management System and place the individual into Status 00.</li> <li>• Complete the Referral Specifics Form in the RSA Case Management System to indicate the Target Group “VR Seriously Mentally Ill (SMI)”.</li> <li>• Schedule initial Intake appointment within 3 business days following receipt of referral packet. If unsuccessful in contacting the individual, notify the Provider to assist in making contact.</li> </ul>

**RSA/VR 1:1 Orientations:**

RSA/VR one-on-one (1:1) Orientations are to be conducted for individuals to learn about the employment services offered through RSA/VR and should be considered only when Group Orientations are not the most suitable option or when there is a specific individual need. When 1:1 Orientations are indicated, the following steps must be followed:

	<b>Provider Responsibility</b>	<b>RSA/VR Responsibility</b>
<b>Prior to 1:1 Orientation</b>	<ul style="list-style-type: none"> <li>Assist the individual in contacting RSA/VR staff to coordinate the scheduling of the 1:1 Orientation.</li> <li>Encourage attendance by offering reminders, arranging transportation, and discussing/ arranging disability-related accommodations, if needed.</li> <li>Complete the top section of the <i>VR Referral Feedback Form</i> and send the form to RSA/VR prior to the scheduled 1:1 Orientation.</li> </ul>	<ul style="list-style-type: none"> <li>Confirm availability and schedule the 1:1 Orientation.</li> <li>Arranging disability-related accommodations, if needed.</li> </ul>
<b>During 1:1 Orientation</b>	<ul style="list-style-type: none"> <li>Attend the scheduled 1:1 Orientation with the individual if the individual requests it.</li> </ul>	<ul style="list-style-type: none"> <li>Complete the bottom section and sign the <i>VR Referral Feedback Form</i>.</li> <li>For individuals choosing to apply for the RSA/VR Program,                             <ul style="list-style-type: none"> <li>Proceed with the Intake appointment to complete both the 1:1 Orientation and Intake appointment at the same time, <b>or</b></li> <li>Schedule the future initial Intake appointment to occur as soon as possible.</li> </ul> </li> </ul>
<b>After 1:1 Orientation</b>	<ul style="list-style-type: none"> <li>Sign the <i>VR Referral Feedback Form</i>.</li> <li>Send the now completed <i>VR Referral Feedback Form</i> back to the RSA/VR staff.</li> <li>Enter the completed <i>VR Referral Feedback Form</i> into the individual's medical records.</li> <li>If the individual declined participation, schedule a meeting to discuss alternative options/ services.</li> <li>If the individual no-showed, follow up to re-engage with RSA/VR.</li> </ul>	<ul style="list-style-type: none"> <li>Send the <i>VR Referral Feedback Form</i> back to the Provider staff for signature.</li> </ul> <p>For individuals choosing to apply for the RSA/VR Program:</p> <ul style="list-style-type: none"> <li>Scan the <i>VR Referral Feedback Form</i> into the RSA Case Management System and place the individual into Status 00.</li> <li>Complete the Referral Specifics Form in the RSA Case Management System to indicate the Target Group "VR Seriously Mentally Ill (SMI)".</li> </ul>

**Member Referral Packet from Provider:**

Comprehensive Intake Assessment and/or SMI Determination/2nd Level Review <b>OR</b> AHCCCS Member Eligibility and Enrollment Verification Form
Annual Assessment (Part E)
Service Plan, including any Service Plan Updates
Most recent Psychiatric Evaluation
Most recent Psychiatric Progress Note
Crisis Plan
Any relevant Vocational Assessment
Arizona Disability Benefits 101 (AZ DB101) Estimator Summary, if available
Guardianship paperwork, if applicable

## Verification of MCO Enrollment

If verification is needed to determine SMI status, please contact the Customer Service phone line for the respective MCO. RSA/VR will need to provide their name, title, and county they serve. The MCO Customer Service phone numbers are:

- Arizona Complete Health: (866) 495-6738
- Care1st: (866) 560-4042
- Mercy Care: (602) 586-1841 or (800) 564-5465

## RSA/VR Intake:

1. The *VR Application Signature Form* and the *VR Intake Form* must specify “SMI” as the Special Project.
2. The *VR Intake Form* must have the “Additional Identifier” completed to specify “Serious Mental Illness-Assigned RBHA”.
3. VR program eligibility should be determined as soon as possible with the best practice of Eligibility Determination occurring within 30 days of a signed VR application.
4. The individual must be notified of the eligibility decision via letter and a copy must be provided to the Provider by RSA/VR.

## Communication/Coordination

RSA/VR staff and Provider staff will uphold a professional, cooperative, and collaborative team relationship in order to meet the rehabilitation/employment-related needs of their mutual members.

## Weekly Consultations

RSA/VR and the Provider’s designated employment personnel are required to meet on a frequent and ongoing basis, at a minimum every 5 business days. These meetings are referred to as “weekly consultations”. Weekly consultations regarding prospective or mutually enrolled individuals may be face-to-face or via email, videoconferencing, or telephone. At a minimum, the following items may be discussed, as applicable.
<b>Referrals</b>
Potential referrals
Review of recently referred individuals, including individuals stating interest in the VR program as indicated on the VR Referral Feedback form
Review of caseload roster comparisons in order to confirm VR status.
Coordinate efforts to schedule future intake appointments.
<b>VR Services Engagement</b>
Recent RSA/VR program case status movement
Client participation in RSA/VR-funded services
Individualized Plan for Employment (IPE) Development
Individuals identified as needing additional support to remain engaged throughout the RSA/VR program
Any barriers to employment (e.g., transportation barriers, legal issues, etc.)
Closures
<b>Significant Changes</b>
Obtained employment, lost employment, graduated from training/school, hospitalizations, medication changes, changes in contact information, etc.
<b>Health Home Engagement</b>
Engagement in behavioral health services, including employment
Provision of Extended Supported Employment (ESE) services (individuals engaged in ESE services)
<b>Other</b>
Changes in schedule for orientation, weekly consultations, etc.

## Re-Engagement

If individuals are not maintaining engagement with the RSA/VR program due to loss of contact, inability to locate, or no longer interested in RSA/VR services, prior to initiating the RSA/VR closure process, the following must occur.

1. In addition to active outreach to the individual per RSA/VR policy, RSA/VR must also attempt to contact the individual's emergency contact and the assigned Provider. If contacting the Provider and unable to reach designated employment personnel, RSA/VR must also contact the individual's case manager, or another clinical team member.
2. Providers must make all reasonable efforts to meet with the individual and discuss their RSA/VR services. Providers may also utilize different techniques, such as Motivational Interviewing, to assess the individual's readiness and ability to continue with their RSA/VR services. Providers must educate the individual on the benefits of remaining with RSA/VR and then update RSA/VR on the outcome.
3. All re-engagement efforts must be documented and available for review in the member records.

## Information Sharing

RSA/VR and Providers are both responsible for sharing pertinent information with any involved third-party employment providers.

Required RSA/VR documentation, as listed in the table below, is to be provided to the Providers and filed in the individual's Medical Record.

<b>RSA/VR Documentation</b>
VR Referral Feedback Form
Combined VR Eligibility Letter
Individualized Plan for Employment (IPE)
ESE meeting progress note
Closure Decision Letter (15-days until closure)
Closure Justification Template (officially closed)
Other information to the extent required to meet the purposes of this agreement

RSA/VR will provide a list of mutually enrolled individuals to the Provider on a monthly basis that includes, but not limited to, date of birth, RSA/VR status, and status date.

## Quarterly Coordination Meetings

These quarterly meetings will provide an opportunity to continue collaboration; discuss opportunities and challenges; and provide technical assistance. The meetings shall be facilitated by the RBHA Employment Administrator, or designee. Ad hoc meetings may be scheduled as needed.

Standing agenda items may include:

- Updates
- Information/data sharing
- Challenges/Solutions
- Success stories

It will be up to each MCO Employment Administrator to decide whether or not to combine any Quarterly Coordination Meetings for providers that have multiple locations with similar Provider staff and/or VR Counselors.

## Supported Employment/Extended Supported Employment (SE/ESE)

Everyone benefits from support at work. For many people, that support may come from family members, friends, and/or co-workers. For working individuals who also have mental health challenges, additional and specialized supports may be needed. These specialized supports are often referred to as Job Coaching services, or ongoing employment support.

Job Coaching supports or services for an individual may include, but are not limited to, the following: navigating the work environment; time management; interpersonal relationships; managing tasks and priorities; adjusting to change; addressing mental health issues; negotiating for “reasonable accommodations”; discrimination on the job; and managing finances and benefits.

For the purposes of the ISA and these Statewide Collaborative Protocols, Job Coaching is referred to as Supported Employment (SE) and is provided by and funded by RSA/VR, while Extended Supported Employment (ESE), or long-term Job Coaching, is provided by and funded by the MCOs.

See flow chart below to reference the process of SE/ESE and ESE Meetings:

What is an ESE Meeting?	
The ESE meeting facilitates the individual's transition from short-term job coaching (SE) to long-term job coaching (ESE) and the transition of funding from RSA/VR to the health plan. Participants will discuss the individual's employment and success, next steps with RSA/VR, and plans for long-term job coaching support services. Meetings may occur via in-person, via videoconferencing, or via telephone, and are organized by the RSA/VR staff.	
<b>AHCCCS member with an SMI designation opens a VR case, receives VR services, and obtains employment</b>	
Both RSA/VR staff <b>AND</b> RBHA Provider staff will have conversations with the individual regarding the benefits of ESE services throughout the rehabilitation process.	
Individual gains employment – RSA/VR moves the individual into Status 22. Short-term, intensive Job Coaching services are provided by and funded by RSA/VR (SE).	
RSA/VR staff have monthly meetings with the individual to follow up on any employment-related needs, services, and updates. RBHA Provider staff may be invited to these monthly meetings based on the individual’s preference.	
Individuals may decide whether or not to opt for ESE services at any time. RSA/VR informs the assigned RBHA Provider of the individual’s decision. Both sides document in their respective case files.	
Individual <b>ACCEPTS</b> ESE services.	Individual <b>DECLINES</b> ESE services
RSA/VR schedules “ESE Meeting” when job stability is met and invites the following to the meeting: Individual, Employment provider staff, Job Coach(es), and any others the individual wants to invite.	There is no need for an ESE Meeting. Individual will be successfully closed after 90 days (Status 26) as long as the individual continues to have job stability.
Prior to the ESE meeting, the RBHA Provider staff will update the individual’s Service Plan to indicate the need for Ongoing Support to Maintain Employment (H2025).	Even though ESE services were declined, the individual may still receive job coaching supports at any time that are reimbursed by Medicaid (Ongoing Support to Maintain Employment – H2025).
After the ESE meeting, progress notes must be provided to the Provider for the individual’s case file. Funding is transferred from RSA/VR to the RBHA. With this shift in funding, the RBHA-contracted ESE Provider is now responsible for ensuring job coaching services occur with the individual when the need is identified.	
The individual remains in Status 22 with RSA/VR for a minimum of 90 calendar days after the “ESE Meeting”. RSA/VR closure (Status 26) occurs after the 90 days, as long as the individual continues job stability.	



## Education

Description	Timeframe	Staff Responsibility
<b>Review the Statewide Collaborative Protocols</b>	<ul style="list-style-type: none"> <li>• Within 60 days of employment date</li> <li>• Ongoing</li> </ul>	<ul style="list-style-type: none"> <li>• RSA/VR staff</li> <li>• VR BHS Statewide Coordinator and Specialist</li> <li>• Provider employment staff</li> <li>• RBHA Employment Administrators</li> </ul>
<b>Provide a VR overview to Provider clinical team/staff.</b>	<ul style="list-style-type: none"> <li>• Bi-Annual</li> </ul>	<ul style="list-style-type: none"> <li>• Conducted by RSA/VR staff</li> <li>• Coordinated by Provider employment staff</li> </ul>
<b>Attend “Bi-Annual ISA Coordination Meetings” when scheduled.</b>	<ul style="list-style-type: none"> <li>• Bi-Annual</li> </ul>	<ul style="list-style-type: none"> <li>• RSA/VR staff</li> <li>• Provider employment staff</li> </ul>

## Dispute Resolution

The following applies to disputes occurring between individuals, RSA/VR staff, and/or Provider staff at the clinic level and does not apply to disputes regarding contractual agreements between AHCCCS and the MCOs.

All mutual members have access to a dispute resolution process regarding any access to their care. Disputes related to behavioral health/vocational services should always be resolved at the lowest possible level, yet it is equally important that the member is aware of the formal dispute process. A dispute or concern that is not able to be resolved between the parties will be addressed and follow the specific procedure that will assist in resolving the dispute at the basic level.

Process for Dispute Resolution (illustrated in the table below)

1. The process is initiated by a dialogue between the two parties involved in order to problem solve prior to progressing to the next level for resolution. Staff from each agency may consult with supervisory staff for guidance but the dispute or concern shall be initially addressed between the parties involved within a reasonable timeframe.
2. If the previous step is unsuccessful in resolving the dispute, then a meeting shall occur with the two parties involved and their direct supervisors.
3. If the previous step is unsuccessful in resolving the dispute, then a meeting shall occur with the two parties involved, their direct supervisors, and the MCO Employment/Vocational Administrator and the RSA Statewide Behavioral Health Specialist.
4. If the previous step is unsuccessful in resolving the dispute, then a meeting shall occur with AHCCCS Employment Administrator, the RSA/VR Statewide Behavioral Health Coordinator, MCO Employment/Vocational Administrators, RSA/VR Behavioral Health Counselors, RSA/VR Supervisor, RSA/VR APM, and Provider employment personnel.

Step	Timelines	Immediate Action	Parties Involved
1	Awareness of Complaint/ Dispute	Discussion with directly involved parties	RSA/VR Counselors, Provider Employment Staff, and/or Individual

2	If the Complaint/Dispute is not resolved within 30 days from the time of the complaint	Elevate to supervisors	Above, plus: RSA/VR Supervisor and Provider Supervisor
3	If the Complaint/Dispute is not resolved with 60 days from the time of the complaint	Elevate to MCO Employment/ Vocational Administrator and the RSA Statewide Behavioral Health Specialist	Above, plus: Employment/Vocational Administrator and the RSA Statewide Behavioral Health Specialist
4	If the Complaint/Dispute is not resolved within 90 days from the time of the complaint	Elevate to the AHCCCS Employment Administrator, the RSA/VR Statewide Behavioral Health Coordinator	Above, plus: AHCCCS Employment Administrator, the RSA/VR Statewide Behavioral Health Coordinator

# Statewide Collaborative Protocols

## Signature Page

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AHCCCS Employment Administrator

6/28/2024

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Date

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Arizona Complete Health-Complete Care Plan Employment/Vocational  
Administrator (or designee)

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Date

*Jennifer Zepeda*

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Mercy Care Employment/Vocational Administrator (or designee)

June 28, 2024

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Date

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