



DCS Comprehensive Health Plan INTERNAL POLICY

TITLE Resource Coordination	POLICY NUMBER OP-MS-05
RESPONSIBLE FUNCTION AREA Resource Coordination	EFFECTIVE DATE 10/31/2022
Initiated: 10/31/22 Date Reviewed: 10/31/22	

POLICY STATEMENT

This policy outlines Arizona Department of Child Safety (DCS) Comprehensive Health Plan (CHP) procedures for providing initial care management and coordination to caregivers of children and youth in out-of-home care statewide upon enrollment to DCS CHP to ensure the provision of appropriate and timely coordination of care.

AUTHORITY

[A.R.S. § 8-512](#), Comprehensive medical and dental care; guidelines.

[A.R.S. § 8-514.05](#), Foster care provider and department access to child health information; consent to treatment.

[A.A.C. R9-22-509](#), Transition and Coordination of Member Care

The Intergovernmental Agreement (IGA) between Arizona Health Care Cost Containment System (AHCCCS) and Arizona Department of Child Safety (DCS) for the Comprehensive Health Plan (CHP) outlines health plan operational requirements.

The contract between the Department of Child Safety (DCS) for the Comprehensive Health Plan (CHP) and the Managed Care Organization (MCO) contractor outlines the contractual requirements for compliance with continuity and quality of care coordination for all members.

DEFINITIONS

Care Coordination: Actions taken to ensure a member receives needed health care without interruption, such as assistance in obtaining care from practitioners and providers in various organizations or across a period of time. Care Management associates establish specific goals that can be reached with minimal member outreach. Typical methods of communication are by mail, telephone, and email.

Early and Periodic Screening, Diagnostic and Treatment (EPSDT): A comprehensive child health program of prevention, treatment, correction, and improvement of physical and behavioral health conditions for AHCCCS (Arizona Medicaid) members under the age of 21. EPSDT services include



screening services, vision services, dental services, hearing services and all other medically necessary mandatory and optional services listed in Federal Law 42 U.S.C. 1396d (a) to correct or ameliorate defects and physical and mental illnesses and conditions identified in an EPSDT screening whether or not the services are covered under the AHCCCS State Plan. Limitations and exclusions, other than the requirement for medical necessity and cost effectiveness, do not apply to EPSDT services.

POLICY

DCS/CHP provides member support through caregiver outreach and coordination to enhance a ‘whole child’ and family approach to healthcare service delivery for children in out of home care.

PROCEDURES

Care Coordination Activities

DCS CHP Resource Coordination function area contributes to care coordination efforts through telephonic outreach to caregivers upon health plan enrollment to identify and escalate the need for immediate care coordination and/or interventions from DCS/CHP Health Coordination and System of Care function areas to ensure that children and youth in out-of-home care are receiving needed services in a timely manner.

Outreach and Education

DCS CHP’s contracted MCO sends newly enrolled members a comprehensive compilation of written information within 12 days of enrollment to assist caregivers with accessing appropriate, cost-effective health care. Materials and methods of dissemination are based upon regulatory requirements and member needs. [*See DCS/CHP Policy OP-MS-01, Member Information Requirements*].

The Resource Coordination function area delivers customized health plan information and resources directly to caregivers through telephonic and email contact. Resource Liaisons contact caregivers to review:

- Instructions on how to access member handbook and how to use the Member ID Card
- Assistance with selecting healthcare providers and pharmacies;
- Explanation of member benefits including Early and Periodic Screening, Diagnostic and Treatment (EPSDT) requirements and well-child, dental, vision including replacement glasses and behavioral health services;
- Required health appointments needed within the first 30 days of entry into out of home care;
- Addressing gaps in healthcare services including immunizations;
- Contact information for health plan staff and other appropriate professionals who can provide family support and advocacy if challenges occur; and



- Referrals to community based resources including family/peer to peer support agencies/organizations;

Collaboration and Coordination

The Resource Coordination function escalates issues when needed to DCS/CHP System of Care and Health Coordination function areas for additional support to caregivers:

- Aiding in understanding the clinical needs of the child;
- Advocating for the review of quality of care concerns;
- Troubleshooting barriers to care; and
- Emphasizing an integrated approach to health care.

DCS/CHP Resource Coordination function area collaborates with members’ custodial agency representatives who play a vital role in ensuring that the members receive optimum health care. Custodial agency representatives help to achieve member compliance with EPSDT, dental and other required visits and facilitates visits to needed dental services.

DCS/CHP Resource Coordination function area collaborates with DCS/CHP’s contracted MCO Integrated Care Management (ICM) Care Managers’ and responds to request for assistance with identification of custodial agency representatives.

REFERENCES

[AHCCCS AMPM Policy 1020, Medical Management Scope and Components](#)

DCS CHP HS-CC-02 Care Management Policy

DCS CHP AD-CO-05 Cultural Competency-Language Access Plan & Family-Member Centered Care Policy

RELATED FORMS

N/A

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Resource Coordination Administrator

Date

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Chief Executive Officer

Date



REVIEWED AND REVISED

Date (Month/Year)	Reason for Review	Revision Description
10/2022	New Policy	New Policy