



## Integrating Behavioral Health into the IEP Process

**AND**

How Behavioral Health can Help Support A Youth's Successful Transition from School to Work




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### What you will learn today

- ✓ Some facts regarding the prevalence of mental health issues with children and youth in America and some consequences of untreated mental health issues
- ✓ Statewide structure of the AHCCCS Behavioral Health System
- ✓ Eligibility requirements for AHCCCS behavioral health services
- ✓ The Arizona Vision and 12 Principles
- ✓ The benefits of collaboration between behavioral health and education
- ✓ Similarities between the Individual Education Program (IEP) and the Child and Family team (CFT) plan
- ✓ How families, educators, and behavioral health staff can help make collaboration happen
- ✓ How to address barriers
- ✓ Resources to support successful transition from school to work



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### Facts on Children and Youth's Mental Health in America

- Mental health problems affect one in every five young people at any given time. (Department of Health & Human Services 1999)
- Serious emotional disturbances affect 1 in 10 young people at any given time. (Department of Health & Human Services 1999)
- An estimated two-thirds of all young people with mental health problems are not getting the help they need. (Department of Health & Human Services 1999)
- Up to 14% of high school students with mental health problems receive grades consisting of mostly Ds & Fs compared to 7% of children with other disabilities. (U.S. Dept. of Education report to Congress 2001)



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### Mental Health Facts (continued)

- Approximately 50% of students age 14 and older who are living with a mental illness drop out of high school. This is the highest dropout rate of any disability group. (U.S. Dept. of Education report to Congress 2001)
- 65 percent of boys and 75 percent of girls in juvenile detention have at least one mental illness. (National Institute of Mental Health Study 2002)
- Suicide is the third leading cause of death for 15 - 24 year olds (approx. 5,000 young people) and the sixth leading cause of death for five - 15 year olds. (American Academy of Child and Adolescent Psychiatry)



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### Who is AHCCCS

- **Arizona Health Care Cost Containment System** (written as AHCCCS and pronounced 'access') is Arizona's Medicaid program.
- Medicaid is a federal healthcare program jointly funded by the federal and state governments for individuals and families who may qualify for acute or long-term services.
- Individuals must meet certain income and other requirements to obtain services.




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### Who is Eligible?

- **Title T21/T19** - Title 19 benefits are provided through the Medicaid federal entitlement program; benefits are delivered in Arizona through the AHCCCS.
- ✓ **Arizona Long Term Care System (ALTCSS)** - It is Arizona's Medicaid program that provides long term care services to eligible Arizona residents who are blind, disabled, or have a developmental disability.
- ✓ **Comprehensive Medical and Dental Program (CMDP)** - It is the health plan responsible for ensuring, in partnership with foster care providers, the provision of appropriate and quality health care services for the well-being of Arizona's children in foster care.
- ✓ **Kids Care** - The **State Children's Health Insurance Program (SCHIP)** is a partnership between the Federal and state governments that provides health coverage to uninsured children whose families earn too much to qualify for Medicaid, but too little to afford private coverage.




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## How to Apply for AHCCCS

The parent/guardian or student (18 years or older) can:

- can apply through the AHCCCS website [www.azahcccs.gov/Members/GetCovered/apply](http://www.azahcccs.gov/Members/GetCovered/apply)
- can contact the local RBHA, CRS or behavioral health provider to begin the application process
- can apply through **Health-e-Arizona Plus** website [www.healtharizonaplus.gov](http://www.healtharizonaplus.gov)




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## Arizona Health Care Cost Containment System (AHCCCS)

### Responsible for monitoring:

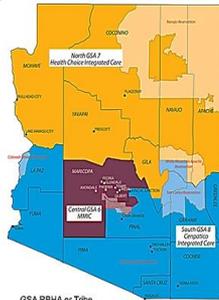
#### The Regional Behavioral Health Authorities (RBHAs)

- Health Choice Integrated Care (HCIC)
- Mercy Maricopa Integrated Care (MMIC)
- Cenpatico Integrated Care (C-IC)

#### Children's Rehabilitative Services (CRS)

#### Fee-for-Service Tribal RBHAs (T/RBHAs)

- White Mountain Apache Tribe
- Gila River Indian Community
- Pascua Yaqui Tribe
- Navajo Nation
- Colorado River



GSA RBHA or Tribe  
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## The Arizona Vision

In collaboration with the child and family and others, Arizona will provide accessible behavioral health services designed to aid children to:

1. Achieve success in school
2. Live with their families
3. Avoid delinquency
4. Become stable and productive adults

Services will be tailored to the child and family and provided in:

1. The most appropriate setting
2. A timely fashion
3. In accordance with best practices
4. Respecting the child's family's cultural heritage



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### The 12 Arizona Principles

- 1. **Collaboration with the Child and Family**
- 2. Functional Outcomes
- 3. **Collaboration with Others**
- 4. Accessible Array of Behavioral Health Services
- 5. Best Practices
- 6. **Most Appropriate Setting (Least Restrictive Environment)**




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### The 12 Arizona Principles - continued

- 7. Timeliness ("Assess and serve promptly")
- 8. **Services Tailored to Child and Family**
- 9. Stability
- 10. **Respect for the Child and Family's Unique Cultural Heritage**
- 11. **Independence**
- 12. Connection to Natural Supports




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### Flow of Behavioral Health Services

- ⦿ Child Enters the behavioral health system
- ⦿ Interim service plan developed and initial assessment begun
- ⦿ Any crises are stabilized
- ⦿ Child Family Team (CFT) Developed by identifying team members and supports
- ⦿ Behavioral health services initiated
- ⦿ Initial Strengths, Needs & Cultural Discovery (SNCD)
- ⦿ Assessment completed and Behavioral Health Service Plan developed.



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### What is a CFT?

- A Child and Family Team is a group of people that includes at a minimum: the child, his/her family or guardian, and a behavioral health CFT facilitator. It should also include any others the child and family would like to participate (school staff, P.O., DCS, etc.)



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### Key Elements of Child and Family Teams

- Strengths and needs based planning
- Family as partner
- Informal supports
- Collaboration
- Creative approaches to treatment
- Promote positive connections instead of reliance
- Customize services
- Offer treatment in home or community if possible




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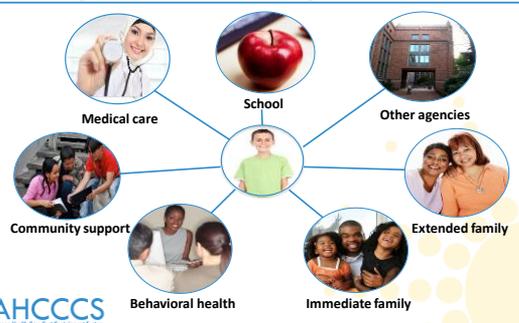
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### Examples of a CFT Composition




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### IEP Meeting Vs. CFT Meeting



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### Discussion of Current Performance

#### IEP

PLAAFP  
Present Levels of Academic Achievement and Functional Performance

#### CFT

SNCD  
Strengths, Needs and Cultural Discovery



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### Future Planning

#### IEP

Measurable Annual Goals

#### CFT

Treatment Plan with measurable outcomes



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### Addresses Behavioral Concerns

**IEP**

**CFT**

Functional Behavioral Assessment (FBA) & Behavioral Intervention Plan (BIP)

Functional Behavioral Assessment (FBA) & Behavioral Intervention Plan (BIP)



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### Transition from School to Work

**IEP**

**CFT**

Transition Planning

Transition Planning



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### Advantages of collaboration between the IEP and CFT processes

- Minimize meetings for families
- Solving problems through collaboration
- Opportunity for support and assistance
- Cohesive goals
- Consistent responses to behaviors
- Ongoing communication between all those involved with the child i.e. behavioral health staff, teacher, CPS case manager, Juvenile Probation Officer, Day care provider, mentor, etc.
- Increased academic performance
- Increased attendance
- Decrease in behavioral concerns & discipline referrals
- Possible decrease in the need for special education services



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### Array of Behavioral Health Services

- **Behavioral Health Day Programs** - Supervised Day, Therapeutic Day, Medical Day
- **Support Services** - Case Management, Personal Assistance, Family & Peer Support, Therapeutic Foster Care, Respite, Housing Support, Interpreter Services, Transportation
- **Crisis Intervention Services** - Mobile Team Services, Telephone, Urgent Care
- **Prevention** - Substance Abuse education, prevention & treatment services
- **Treatment Services** - Counseling, Consultation, Assessment & Specialized Testing
- **Medical Services** - Medication, Laboratory, Radiology and Medical Imaging, Medical Management
- **Inpatient Services** - Hospital, Sub Acute, Residential Treatment
- **Residential Services** - B.H. Residential Facility
- **Rehabilitation Services** - Living Skills, Cognitive Rehab, Health Promotion, Supported Employment




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### Expectations for School personnel

- Provide insights into the student's learning style and school performance
- Assist in developing the treatment plan
- Support and cooperate in implementation of treatment plan
- Honest and timely communication
- Facility in which to meet when appropriate



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### Expectations of Behavioral Health Staff

- Provide insights into current treatment goals
- Assist in developing the IEP
- Support and cooperate in the implementation of IEP
- Honest and timely communication
- Facility in which to meet when needed



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### Additional benefits of a collaborative process

- Provides a holistic approach to difficult situations
- Can provide valuable information on a child's strengths, needs, learning style, medication effect/side effects and overall problem solving skills.
- Schools may have specific behavioral or educational goals important in behavioral health plan or vice versa.
- New perspectives and approaches
- Additional contacts with other agencies
- Support from outside of school and added resources
- Stronger relationships with parents



AHCCCS  
Arizona Health Care Cost Containment System

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### What is the ultimate goal?

- To integrate mental health services with educational services resulting in improved academic and behavioral outcomes.



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### How can I help make this collaboration happen?

- **School staff can;**
  1. Ask child's caregiver if they are enrolled with an AHCCCS behavioral health provider
  2. If yes, ask caregiver if they can contact the behavioral health agency/staff (caregiver will have to sign a release)
  3. Call the behavioral health worker and start collaborating
  4. Participate in CFT, with parent/caregiver permission



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### How can I help make this collaboration happen?

- **Parents/Caregivers can;**
  1. Speak with both school staff and behavioral health staff and tell them you would like them to work together.
  2. Sign release of information forms to allow this.
  3. Make sure behavioral health staff is invited to the IEP and school staff are invited to the CFT



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### How can I help make this collaboration happen?

- **Behavioral health staff can:**
  1. Ask caregiver if they can contact the child's school (caregiver will have to sign a release)
  2. Call the school and start collaborating
  3. Attend the IEP, with parent/caregiver permission



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### What to do when it's not working

Discuss your concerns immediately with the CFT  
 Consult with the CFT Coach and/or Supervisor  
 Meet with the agency's Clinical Director  
 Call Member Services at the T/RBHA  
 Call Customer Service at DBHS



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## Planning for transition from school to work thru the IEP and CFT

- Must begin no later than the age of 16
- Should be based on the strengths, needs and interests of the youth and family
- Should include individuals chosen by the youth and family that are important to making the transition planning process seamless and successful
- Identify any special needs that the youth may have and/or if the youth will require special assistance services
- Identify the youth's level of life skills and social skills and if they have **employment or education plans**



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## Employment

**For individuals with mental illness, work is not just a paycheck, but rather:**

<ul style="list-style-type: none"> <li>➢ Empowerment</li> <li>➢ Sense of Purpose</li> <li>➢ Increased Self-Worth</li> <li>➢ Community Inclusion</li> <li>➢ Meet new people &amp; make new friends</li> <li>➢ Opportunity to Learn</li> <li>➢ Decrease Hospitalizations</li> </ul>	<ul style="list-style-type: none"> <li>➢ Create a better life</li> <li>➢ Get out of poverty</li> <li>➢ Increase self-esteem</li> <li>➢ Networking</li> <li>➢ Develop new skills for progressive job moves</li> <li>➢ Reduce stigma</li> <li>➢ Create <b>HOPE</b></li> </ul>
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## Employment Services

In Arizona, employment services can be administered in different ways, including:

**AHCCCS Covered Services**

- Psychoeducational Services (A.K.A. Pre-Vocational)
- Ongoing Support to Maintain Employment (A.K.A. Job Coaching)

**Rehabilitation Services Administration / Vocational Rehabilitation (RSA/VR)**

- RSA is a federal agency that oversees the state VR program, which provides employment services for individuals with disabilities
- Interagency Service Agreement (ISA)



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### AHCCCS Covered Services

**RBHA-Enrolled member expresses desire to gain employment:**

Meets with Employment Specialist assigned to Clinical Team to discuss options, including RSA/VR; Refers member to on-site Orientation to learn more about RSA/VR services; Member chooses yes or no to RSA/VR services.

- ❖ If no, the Employment Specialist will proceed with assisting the member gain employment.
- ❖ If yes, the Employment Specialist may provide vocational services, and bill AHCCCS vocational codes, as much as necessary until the member develops their Individualized Plan for Employment (IPE) with RSA/VR .



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### Interagency Service Agreement (ISA)

- ❖ AHCCCS and RSA/VR work together to coordinate and provide vocational services to individuals determined to have a Serious Mental Illness (SMI) through an Interagency Service Agreement (ISA)
- ❖ The purpose of the ISA is to increase the number of employed people with psychiatric disabilities who are successful and satisfied with their vocational roles and environments.
- ❖ AHCCCS contributes funding to RSA/VR for the ISA, which RSA then draws down matching Federal dollars



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### Interagency Service Agreement (ISA) More Key Components

- ❖ Specialty Behavioral Health VR Counselors
- ❖ Eligibility timeframe from 60 days to 30 days
- ❖ VR Orientations held on-site at least 1x/month + weekly meetings between RBHA Providers and VR (Collaboration, Collaboration, Collaboration!!!!)
- ❖ Extended Supported Employment (ESE)



❖ Plus much more....



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### Not SMI ???

- AHCCCS-Eligible members can still receive AHCCCS Covered Services
- RSA/VR Eligibility Requirements
  1. Having a documented disability
  2. Having a disability which presents a barrier to employment
  3. Having the potential and desire to work
  4. Needing services in order to work



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### Health Choice Integrated Care (HCIC)

#### Service Area - Northern Arizona

Mohave, Coconino, Apache, Navajo, Gila, Yavapai and portions of Graham counties

[www.healthchoiceintegratedcare.com](http://www.healthchoiceintegratedcare.com)

**Member Services:** 1-800-640-2123

**Crisis Line:** 1-877-756-4090




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### Mercy Maricopa Integrated Care (MMIC)

#### Service Area – Central Arizona

Maricopa County

[www.mercymaricopa.org](http://www.mercymaricopa.org)

**Member Services:** 1-800-564-5465

**Crisis Line:** 1-800-631-1314




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### Cenpatico Integrated Care (CIC)

**Service Area – Southern Arizona**  
Cochise, Graham, Greelee, La Paz, Pinal, Santa Cruz  
and Yuma Counties

[www.cenpaticointegratedcareaz.com](http://www.cenpaticointegratedcareaz.com)

**Member Services:** 1-866-495-6738

**Crisis Line:** 1-866-495-6735



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### Children’s Rehabilitative Services (CRS)

**Service Area – ALL of Arizona**

Flagstaff (928) 773-2054

Phoenix (602) 914-1520

Tucson (520) 324-5437

Yuma (928) 336-7095



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### Tribal Contractors

**Gila River Indian Community**  
[www.gilariverbha.org](http://www.gilariverbha.org)  
Member Services: 1-800-259-3449

**Navajo Nation**  
[www.nndoh.org/dbhs](http://www.nndoh.org/dbhs)  
Member Services: (928) 871-6235

**Pascua Yaqui Tribe**  
[www.pascuayaqui-nsn.gov](http://www.pascuayaqui-nsn.gov)  
Member Services: 520-879-6060

**Colorado River Indian Tribes**  
[www.crit-nsn.gov](http://www.crit-nsn.gov)  
Member Services: (928) 669-3256

**White Mountain Apache Tribe**  
[www.wmabhs.org](http://www.wmabhs.org)  
Member Services: 1-877-336-4811



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