



Raising Special Kids

**Changes to
AHCCCS
& DDD?
Tell me more...**

Connecting
Fall 2018

From the Director

Thoughts on Arizona's changing managed care landscape



The first time I paid attention to the term ‘managed care’ was at an administrative hearing regarding the denial of therapy services for our son. I knew that my son needed the service. My wife knew it. Our therapists knew it. Even our support coordinator from the Division of Developmental Disabilities (DDD) knew it. So, why was therapy being denied?

The ‘aha’ moment came when I allowed myself to hear the explanation, from Bob Klaehn, M.D., then medical director for DDD, that the documentation prepared by well-intentioned therapists did not adequately illustrate a medical necessity. The problem was in the paperwork. Managed care relies on processes, procedures and paperwork so that doctors, therapists, habilitation providers, and others are paid for services provided. From that moment, a larger picture of systems working together began to emerge.

My son, who has autism and intellectual disability, receives managed care through Arizona’s Medicaid system not merely because of his diagnoses, but because of his individual needs as documented by doctors, specialists, therapists, teachers, psychologists and his parents.

Parents and families often feel like they have to become health care experts to ensure proper care for their child(ren); a heavy burden indeed.

In this edition of *Connecting* we look at upcoming systemwide changes to managed care for families like mine, who receive Medicaid in Arizona. The integration changes are meant to consolidate and streamline care systems while providing choice for members and families.

At Raising Special Kids, our mission of family support remains the same. So, as October 1, 2018 comes and goes, our organization and staff are at the ready to assist Arizona families and professionals with information and support to navigate the changing managed care landscape as described in our lead article.

Christopher Tiffany, MEd

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Parent to Parent support is the heart of Raising Special Kids. Information about local services, educational programs, advocacy, or special health care needs is available in English, Spanish and other languages. Services are provided at no charge to families in Arizona. Raising Special Kids is a 501(c)(3) non-profit organization.

Changes to AHCCCS and DDD

Tell me more...

AHCCCS

Families who receive health coverage through Arizona Health Care Cost Containment System (AHCCCS) may have heard about changes set to begin October 1, 2018. **The most important thing to know is that there is no change to eligibility criteria or services. AHCCCS members will still have access to the same AHCCCS covered services as they do with current health plans and Regional Behavioral Health Authorities (RBHAs).** The changes involve which agencies pay for the services people receive. These changes will result in comprehensive managed care for the whole person rather than acute care (medical) services and behavioral health services offered by different providers. **AHCCCS is referring to these integrated plans as AHCCCS Complete Care or ACC.**



WHAT WILL CHANGE WITH ACC?

In the past, AHCCCS acute care (physical health) services and behavioral health services were provided by different organizations. Beginning October 1, 2018, agencies will be required to provide both physical care and behavioral health services. Members will benefit by only having one health plan that will help coordinate care for better outcomes and improved whole health for the member.

WHO WILL BE AFFECTED BY THIS CHANGE?

- Most adults and children on AHCCCS will be enrolled with ACC Plans beginning October 1, 2018 including members currently enrolled in CRS.
- ACC will not affect members in the Arizona Long Term Care System (ALTCs), including those enrolled with DDD. There are a few exceptions for members who are also eligible for CRS services. (For more information

about members enrolled with CRS, see <http://www.azahcccs.gov/AHCCCS/Initiatives/AHCCCSCompleteCare/CRS/>.)

- ACC **will not** affect members determined to have a Serious Mental Illness (SMI).
- With the exception of foster care children currently enrolled in CRS, ACC **will not** affect most children in foster care enrolled in the Comprehensive Medical and Dental Program (CMDP).

WILL I BE ASSIGNED TO AN ACC PLAN OR WILL I HAVE CHOICE OF AVAILABLE ACC PLANS?

Members in an acute health plan that will also be an ACC Plan in their service area will stay with their current health plan. These members will have choice of other ACC Plans during their annual enrollment choice month.

Members in a health plan that will not be an ACC Plan in their service area have been assigned

an ACC Plan. AHCCCS sent letters to tell members their assigned ACC Plan in June 2018. Members were allowed to choose a different ACC Plan in their service area until July 31, 2018.

Some members in an acute plan that will also be an ACC Plan (not affiliated with their assigned RBHA) in their service area, who received behavioral health services through the RBHA in 2017, were given a one-time choice to move to an ACC Plan that is affiliated with the RBHA in their service area. These members were notified in late June 2018 and were allowed to make their choice during the month of July 2018. **All members will have the opportunity to select a new ACC plan during their enrollment choice month.**

WHAT WILL REGIONAL BEHAVIORAL HEALTH AUTHORITIES (RBHAs) CONTINUE TO PROVIDE?

RBHAs will no longer serve most adults and children. This is because behavioral health services will be provided by the ACC Plan. **RBHAs will continue to serve:**

- Foster children enrolled in

CMDP, including those CMDP members who have a CRS condition.

- Members enrolled with DDD.
- Individuals determined to have a SMI.

There will be no changes to RBHA services for members they continue to serve. RBHAs will also continue to provide crisis, grant funded and state-only funded services.

ACC FAQs FOR MEMBERS WITH CRS CONDITIONS

Q. Will my covered services change under ACC?

A. Under ACC Plans, members will have access to the same array of covered services as they do under their current health plan.

Q. Will CRS member have to change health plans?

A. Currently, most members with CRS conditions are enrolled with UnitedHealthcare Community Plan. Effective October 1, 2018, CRS members will be enrolled with an ACC plan. Under the ACC Plan, members will have access to the same array of covered services as they do under their current health plan.

Q. Will my foster child's Comprehensive Medical Dental Program (CMDP) coverage change?

A. Children in foster care who have CRS conditions will receive all physical health services, including services for their CRS condition, from CMDP. Like all children in foster care, they will transition to the RBHA in their area for behavioral health service.

Q. If my child is enrolled in the American Indian Health Program, how will she/he receive CRS services?

A. The AIHP will provide physical and behavioral health services including CRS services to children enrolled in that program.

Q. How will members with CRS qualifying conditions who are enrolled in DDD/ALTCS receive services?

A. Members with developmental disabilities and CRS conditions who are enrolled in Arizona Long Term Care will remain with UnitedHealthcare Community Plan for physical health services related to their CRS conditions and for all behavioral health services. They will use their assigned DDD health plan for all non-CRS related physical health services.

ACC FAQs FOR AMERICAN INDIAN MEMBERS

Q. What is the American Indian Health Program and who does it serve?

A. The AIHP is currently a program administered by AHCCCS for eligible American Indians. AIHP reimburses for physical and behavioral health services when provided by or through the Indian Health Services or tribally owned or operated organizations. AIHP also pays for physical health services with other medical facilities such as a local hospital.

Q. What changes are happening for AIHP and when will they be effective?

A. Currently, most members enrolled in AIHP are also enrolled with a RBHA or TRBHA for behavioral health services. On October 1, 2018, AIHP will pay for and handle physical and behavioral health services for most eligible American Indian adults and children. AIHP will also pay for services related to a CRS condition. Members will still be allowed to choose AIHP and a TRBHA (when available) for behavioral health services.

Q. Will American Indian members still be allowed to change enrollment?

A. American Indian members can still choose to change enrollment between AIHP (with or without TRBHA enrollment) or the ACC plan at any time.

Q. Will there be changes for American Indian members who are determined to be seriously mentally ill?

A. American Indian members who are determined to be SMI will receive services from the RBHA but can also still choose AIHP for physical health services. Those who currently receive services with TRBHA, there will be no change in service delivery or choice.

For More Information on AHCCCS Complete Care, visit:

www.azahcccs.gov/AHCCCS/Initiatives/AHCCCSCompleteCare/

www.azahcccs.gov/AHCCCS/Initiatives/AHCCCSCompleteCare/CommunityResources/ [video]

HOW WILL AHCCCS COMPLETE CARE CHANGES AFFECT DDD MEMBERS?

Depending on their situation, families who are members of the Division of Developmental Disabilities may also see changes beginning October 1, 2018. **There will be no changes to criteria for eligibility or with the medically necessary services provided for members.**

CHILDREN ELIGIBLE FOR DDD

DDD State-Funded or DD-Only Members are those who are eligible for supports but do not qualify for the Arizona Early Intervention Program (AzEIP) or Arizona Long Term Care (ALTCS). These members are **NOT** affected because they are not Medicaid (AHCCCS) eligible.

Members who are DDD/ALTCS eligible

Will continue to receive:

- Physical health services through a DDD/ALTCS contracted health plan.
- Behavioral health services through the RBHA.

DDD Targeted Support Coordination Members are those who are enrolled in the AHCCCS Medical Benefits program, but are not eligible for ALTCS.

These members, including those with CRS eligible conditions will begin receiving health care through an ACC Plan beginning **October 1, 2018.**

Children who are DDD/ALTCS AND CRS Eligible

Will continue to receive:

- Physical health services through their DDD/ALTCS contracted health plan.
- CRS services and behavioral health services through UnitedHealthcare Community Plan.

CHILDREN IN FOSTER CARE

Children in Foster Care who are NOT DDD/ALTCS Eligible

- If the child is CRS eligible, they will receive physical health services (including services for CRS conditions) through CMDP.
- Behavioral health services will be provided through the RBHA.

Children in Foster Care who ARE DDD/ALTCS AND CRS Eligible

Will continue to receive:

- Physical health services through their DDD/ALTCS contracted health plan.
- CRS services and behavioral health service through UnitedHealthcare Community Plan.

CHILDREN WITH SERIOUS MENTAL ILLNESS (SMI)

Children who are CRS Eligible AND have a Serious Mental Illness (SMI)

- **Who are NOT in Foster Care and NOT DDD/ALTCS Eligible** will receive:
 - Physical health services, behavioral health services and CRS services from the RBHA.

Children who are CRS Eligible AND have a Serious Mental Illness (SMI)

- **Who ARE DDD/ALTCS Eligible** will continue to receive:
 - Physical health services through their DDD/ALTCS contracted health plan.
 - CRS services and behavioral health services through CRS.

ADDITIONAL RESOURCES:

DDD Member Categories: <https://des.az.gov/services/disabilities/ddd-member-categories>

Comprehensive Medical & Dental Program (CMDP): https://dcs.az.gov/sites/default/files/media/kinship_care_outreach_faq_020614.pdf

Qualifying CRS Conditions: www.azahcccs.gov/Members/Downloads/CRS/Qualifying_MedicalConditions

How to apply: www.azahcccs.gov/Members/GetCovered/apply.html

Geographic Service Areas: www.azahcccs.gov/AHCCCS/Downloads/Initiatives/ACC_Map_Web.pdf

DDD Customer Service Center: 844-770-9500

Learning to Advocate Effectively

For two kids with very different needs

Erika LeBlanc first called Raising Special Kids when her daughter Becca was 6 years old. Although Becca had been diagnosed with a Specific Learning Disability at 4 years old, Erika really didn't know what the term meant. It wasn't until Becca was 6 that Erika learned that the SLD her daughter had was Dyslexia. She and her husband were paying privately for a reading tutor and it came as a surprise when the developmental pediatrician asked what supports the school was providing for Becca. The doctor suggested Erika call Raising Special Kids.

Erika shared how she felt about her first conversation with a Family Support Specialist at Raising Special Kids, "It was amazing. I didn't understand Becca's Individualized Education Plan or the special education process. We reviewed Becca's IEP and it really helped me understand it. She provided me with resources, suggested videos and recommended the Raising Special Kids classes."

It seems, although Becca had



The LeBlanc Family

a medical diagnosis of a Specific Learning Disability, her IEP identified her eligibility category for special education as a Speech Language Impairment. Once Erika began to understand Becca's disability and the special education process better, Erika was able to work more effectively with the IEP team to meet Becca's needs.

Just a few months later, Erika reached out to Raising Special Kids again. However, it wasn't Becca she was calling about. It was regarding her son Andrew, a second-grader with autism and ADHD. Andrew had a 504 Plan in place but Erika felt he needed additional supports and services. "This time, we walked through the process of getting Andrew tested for special education and then she helped me prepare for his first IEP."

During the conversation, Erika mentioned her family was moving. The discussion turned to the difference between public schools and charter schools and the resources available for special education. Erika found the information invaluable. "She helped make our decision on where to move and which school to choose so much easier for our family. The public school our kids currently go to has been amazing with both of our kids with special needs!"



Andrew & Becca

Raising Special Kids Workshops & Training

Register online at www.raisingpecialkids.org or call 602-242-4366 | 800-237-3006



Early Childhood Education (Birth - Kindergarten)

Learn the basics of the Individualized Family Service Plan (IFSP) and how to make a smooth transition from early intervention services to preschool at age 3. Participants will learn about the process of evaluation, eligibility and of services provided through an Individualized Education Program (IEP) by your local public school district. The discussion will include the transition process from preschool to Kindergarten and skills parents can help with at home.



Positive Behavior Support

Learn how to reduce unwanted behavior and increase good behavior by using Positive Behavior Supports in your home and in the community. Understand the role you play in your child's behavior, and how to work with the school when behaviors get in the way of learning.



IEP Training

Have a better understanding of Special Education and the Individualized Education Program (IEP). The following topics will be discussed: the IEP document, the parent's role in the special education process, and how to prepare for, and be an effective participant at the meeting. You will learn who is a member of your child's IEP team, how to track your child's progress, and what to do if the team does not agree.



High School Transition

This workshop explains the IEP transition planning process which should begin for students no later than 16 years of age. Discover how to identify classes, activities and services that help prepare students with disabilities for higher education, vocational training, employment, and additional resources that help with planning for adult life.



Turning 18 - Legal Options

Learn about the different legal options families should consider when their child becomes an adult at the age of 18. Become familiar with the steps of the guardianship process. Participants will learn how they can stay involved in decision-making with schools, doctors and other professionals.

These trainings and more are available statewide and at no cost for families.

Please visit our website at www.raisingpecialkids.org for the most current schedule and locations or call 602-242-4366 or 800-237-3007.

To request a Raising Special Kids presentation for your school or organization, see <http://raisingpecialkids.org/trainingworkshop-request/> or call our office at 602-242-4366 or 800-237-3007 for more information.



Cambios en AHCCCS y DDD

Dígame más...

AHCCCS

Puede que las familias que reciben cobertura de salud mediante el Sistema de Contención de Costos del Cuidado de Salud de Arizona (AHCCCS), hayan escuchado algunos rumores sobre cambios programados a iniciarse el 1 de octubre de 2018. **Lo más importante es saber que no hay cambios en los criterios de elegibilidad o los servicios. Los miembros de AHCCCS seguirán teniendo acceso a los mismos servicios cubiertos por dicho sistema, que con los planes de salud actuales y las Autoridades Regionales de Salud del Comportamiento (RBHA).** Los cambios implican qué agencias pagan por los servicios que la gente recibe. El propósito de estos cambios es el deseo de proveer un cuidado integral para toda la persona, en lugar de tener servicios (médicos) de cuidados agudos y servicios de salud del comportamiento, brindados por distintos proveedores. El AHCCCS se refiere a estos planes integrados como AHCCCS Complete Care (Cuidado completo del AHCCCS) o ACC.

¿QUÉ CAMBIARÁ CON ACC?

Antes, los servicios (de salud física) de cuidados agudos de AHCCCS y los servicios de salud del comportamiento eran proporcionados por diferentes organizaciones. A partir del 1/10/18, se requerirá que las agencias brinden servicios tanto de cuidado físico como de salud del comportamiento. Los miembros contarán con el beneficio de sólo tener un plan de salud que les ayudará a coordinar el cuidado para mejores resultados y una salud integral mejorada para ellos.

¿A QUIÉN AFECTARÁ ESTE CAMBIO?

- A la mayoría de los adultos y niños en AHCCCS estarán inscritos con los planes del ACC que empiezan 10/1/18, incluyendo miembros actualmente inscritos en CRS.
- ACC no afectará a los miembros del Sistema de Cuidados a Largo Plazo de Arizona (ALTCS), incluyendo a los que estén inscritos con DDD. Hay unas cuantas excepciones para miembros que también son elegibles para servicios CRS. (Para más información sobre miembros inscritos con CRS, ver [http://www.azahcccs.gov/AHCCCS/Initiatives/AHCCCSCompleteCare/CRS/.](http://www.azahcccs.gov/AHCCCS/Initiatives/AHCCCSCompleteCare/CRS/))

- ACC no afectará a los miembros a quienes se haya diagnosticado con una enfermedad mental severa (SMI, por sus siglas en inglés).
- Con la excepción de los niños colocados en familia que actualmente estén inscritos en CRS, ACC no afectará a la mayoría de los niños colocados en familia inscritos en el Programa Integral de Atención Médica y Dental (CMDP).

¿SE ME ASIGNARÁ A UN PLAN ACC O TENDRÉ OPCIONES DE PLANES ACC DISPONIBLES?

Los miembros de un plan de salud agudo que también será un plan ACC en su área de servicios se quedarán con su plan de salud actual y tendrán la opción de otros planes ACC durante su mes de opción de inscripción anual.

A los miembros de un plan de salud que no serán un plan ACC en su área de servicios, se les ha asignado un plan ACC. AHCCCS envió cartas para informar a los miembros de su plan ACC en junio de 2018, y se les permitió elegir un plan ACC diferente en su área de servicios hasta el 31 de julio de 2018.

A algunos miembros de un plan agudo que también serán un plan ACC (no afiliado con su RBHA asignada) en su área de servicios,

quienes recibían servicios de salud del comportamiento mediante la RBHA en 2017, se les dió una única oportunidad de cambiar a un plan ACC afiliado con la RBHA en su área de servicios. Estos miembros fueron notificados a finales de junio de 2018 y se les permitió hacer su elección durante el mes de julio de 2018.

¿QUÉ SEGUIRAN PROPORCIONANDO LAS AUTORIDADES REGIONALES DE SALUD DEL COMPORTAMIENTO (RBHA)?

Las RBHA ya no servirán a la mayoría de los adultos y niños, debido a que el plan ACC brindará los servicios de salud del comportamiento. Las RBHA seguirán dando servicio a:

Niños en ubicación familiar inscritos en CMDP, incluyendo a los miembros de CMDP que tengan una condición CRS.

Miembros inscritos con DDD.

Individuos a los que se les haya determinado una enfermedad mental severa.

No habrá cambios a los servicios RBHA para los miembros a los que siguen atendiendo. Las RBHA también seguirán ofreciendo servicios en casos de crisis, subvencionados y financiados solamente por el estado.

PREGUNTAS FRECUENTES SOBRE ACC PARA MIEMBROS CON CONDICIONES CRS

P. ¿Con ACC cambiarán los servicios que tengo cubiertos?

R. De acuerdo con los planes ACC, los miembros tendrán acceso a la misma gama de servicios cubiertos bajo su plan de salud actual.

P. ¿Los miembros CRS tendrán que cambiar de plan de salud?

R. Actualmente, la mayor parte de los miembros con condiciones CRS están registrados con el plan comunitario de UnitedHealthcare. Efectivo el 1 de octubre de 2018, los miembros CRS serán inscritos con un plan ACC. Bajo el plan ACC, los miembros tendrán acceso a la misma gama de servicios cubiertos bajo su plan de salud actual.

P. ¿Cambiará la cobertura del Programa Integral de Atención Médica y Dental (CMDP) de mi hijo colocado en familia?

R. Todos los niños colocados en familia que tengan condiciones CRS recibirán el servicio de salud física, incluyendo servicios para su condición CRS, del CMDP. Como todos los niños en colocación en familia, harán la transición a la Autoridad Regional de Salud del Comportamiento (RBHA) en su área para servicios de salud del comportamiento.

P. Si mi hijo/a está inscrito en el Programa de Salud para Indígenas Americanos (AIHP), ¿cómo recibirá los servicios CRS?

R. El AIHP proporcionará servicios de salud física y del comportamiento, incluyendo servicio CRS para niños inscritos en ese programa.

P. ¿Cómo recibirán servicios los miembros con condiciones que califiquen para CRS que estén inscritos en DDD/ALTCS?

R. Los miembros con discapacidades del desarrollo y condiciones CRS que estén inscritos en Cuidado a Largo Plazo en Arizona seguirán con el plan comunitario de UnitedHealthcare para servicios de salud física relacionados con sus condiciones CRS y para todos los servicios de salud del comportamiento. Usarán su plan de salud DDD asignado para todos los servicios de salud física no relacionados con CRS.

PREGUNTAS FRECUENTES SOBRE ACC PARA MIEMBROS INDÍGENAS AMERICANOS

P. ¿Qué es el Programa de Salud para Indígenas Americanos y a quién da servicio?

R. Actualmente, el AIHP es un programa administrado por el AHCCCS para Indígenas Americanos elegibles. El AIHP reembolsa los servicios de salud física y del comportamiento cuando los proporciona o son a través del Servicio de Salud para Indígenas u organizaciones que son propiedad de u operadas por la tribu. El AIHP también paga por servicios de salud física con otras instalaciones médicas, como un hospital local.

P. ¿Qué cambios se están dando en el AIHP y cuándo entrarán en vigor?

R. Actualmente, la mayor parte de los miembros inscritos en el AIHP también lo están con una RBHA o TRBHA (autoridad regional de salud conductual) para servicios de salud del comportamiento. El 1 de octubre de 2018, el AIHP pagará y manejará los servicios de salud física y del comportamiento para la mayoría los niños y adultos indígenas americanos elegibles. AIHP también pagará por los servicios relacionados con una condición CRS. Los miembros todavía podrán elegir el AIHP y una TRBHA (de estar disponible) para servicios de salud del comportamiento.

P. ¿Se les permitirá a los miembros indígenas americanos cambiar de inscripción?

R. Los miembros indígenas americanos todavía pueden elegir cambiar de inscripción entre AIHP (con o sin afiliación TRBHA) o el plan ACC en cualquier momento.

P. ¿Habrá cambios para los miembros indígenas americanos a los que se hayan declarado con una enfermedad mental grave?

R. Los miembros indígenas americanos a los que se haya declarado con una enfermedad mental grave recibirán servicios de la RBHA, pero de cualquier manera pueden optar por AIHP para servicios de salud física. En el caso de los que actualmente reciben servicios con TRBHA, no habrá cambios en la entrega o elección del servicio.

Para Más Información sobre Cuidado Completo del AHCCCS, visite:

www.azahcccs.gov/AHCCCS/Initiatives/AHCCCSCompleteCare/

<https://youtu.be/PToTcRWsDSU> [vídeo]

¿CÓMO AFECTARÁN LOS CAMBIOS DEL CUIDADO COMPLETO DE AHCCCS A LOS MIEMBROS DDD?

Dependiendo de su situación, puede que las familias que sean miembros de la División de Discapacidades del Desarrollo también verán cambios a partir del 1 de octubre de 2018. **No habrá cambios en los criterios de elegibilidad o con los servicios médicamente necesarios brindados a los miembros.**

NIÑOS ELEGIBLES PARA DDD

Los miembros DDD con financiamiento del estado o sólo DD son aquellos que son elegibles para apoyos, pero que no califican para el Programa de Intervención Temprana de Arizona (AzEIP) o Cuidado a Largo Plazo de Arizona (ALTCS). Estos miembros **NO** se ven afectados porque no son elegibles para Medicaid (AHCCCS).

Miembros elegibles para DDD/ALTCS

Seguirán recibiendo:

- Servicios de salud física mediante un plan de salud contratado por DDD/ALTCS.
- Servicios de salud del comportamiento mediante la RBHA.

Miembros de coordinación de Apoyo Selectivo son los que están inscritos en el programa de beneficios médicos de AHCCCS, pero que no son elegibles para ALTCS. Dichos miembros, incluyendo a los que cuentan con condiciones elegibles para CRS, empezarán a recibir cuidados de salud mediante un plan ACC a partir del **1 de octubre de 2018**.

Niños elegibles para DDD/ALTCS Y Elegibles para CRS

Seguirán recibiendo:

- Servicios de salud física mediante su plan de salud contratado bajo DDD/ALTCS.
- Los servicios CRS y servicios de salud del comportamiento mediante el plan comunitario de UnitedHealthcare.

NIÑOS EN COLOCACIÓN EN FAMILIA

Niños colocados en familia que **NO** son elegibles para DDD/ALTCS

- Si el niño es elegible para CRS, recibirá servicios de salud física (incluyendo servicios para condiciones CRS) a través de CMDP.
- Los servicios de salud del comportamiento serán brindados mediante la RBHA.

Niños colocados en familia que **Sí** son elegibles para DDD/ALTCS

Seguirán recibiendo:

- Servicios de salud física mediante SU plan de salud contratado bajo DDD/ALTCS.
- Servicio de CRS y de salud del comportamiento mediante el plan comunitario de UnitedHealthcare.

NIÑOS CON ENFERMEDADES MENTALES SEVERAS (SMI)

Los niños que son elegibles para CRS Y tienen una enfermedad mental severa (SMI)

- **que NO estén en colocación en familia y NO sean elegibles para DDD/ALTCS** recibirán:
 - Servicios de salud física, servicios de salud del comportamiento y servicios CRS de la RBHA.

Los niños que son elegibles para CRS Y tienen una enfermedad mental severa (SMI)

- **que SON elegibles para DDD/ALTCS** seguirán recibiendo:
 - Servicios de salud física mediante SU plan de salud contratado DDD/ALTCS.
 - Servicios CRS y de salud del comportamiento mediante CRS.

RECURSOS ADICIONALES:

Categorías de miembros DDD: <https://des.az.gov/services/disabilities/ddd-member-categories>

Programa Integral de Atención Médica y Dental (CMDP): <https://dcs.az.gov/sites/default/files/cmdpmemberhandbookspanish.pdf>

Condiciones que califican para CRS: www.azahcccs.gov/Members/Downloads/CRS/QualifyingMedicalConditions

Cómo solicitar: www.azahcccs.gov/Members/GetCovered/apply.html

Áreas de servicio geográficas: www.azahcccs.gov/AHCCCS/Downloads/Initiatives/ACC_Map_Web.pdf

Centro de atención al cliente DDD: **844-770-9500**

Talleres y entrenamientos

Por favor vea nuestra página de web para el horario y los lugares más actuales, www.raisingsspecialkids.org, o llame al 800-237-3007



El Comportamiento Positivo



Entrenamiento del IEP



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Parent Leaders

Thank you! Parent Leaders are the heart of our mission.

May - July 2018

Avondale

Jennifer Priddy

Chandler

Dawn Bailey
Christy Holstad
Aimee Johnson
Lisa Myers
Amanda Steele
Laura Stoner
Cathy Turner
Noelle White

Flagstaff

Cindy May
Claire Portillo

Gilbert

Sherrine Hayward
Sonya Kanidis
Heather Prouty

Kim Updegraff
Tricia Zimmerman
Laveen

Michelle Dumay
Litchfield Park

Jamie Pack-Adair
Mesa

Cynthia Elliott
Wendi Howe

Peoria

Kim Humphrey
Greggory Ohannessian
Kris Ohannessian-Dean

Phoenix

Veronica Castillo
Susan Coates
Lucia Cota
Aimee Craumer

Cecilia Hartke
Heather Joy Magdelano
Stephanie Mickelsen
Terri Nigro
Ched Salasek
Michael Sanderfer
Sherri Scruggs
Samuel Segura Bailon
Laura Senften
Eadie Smith
Gissela Welle

Queen Creek

Kin Counts
Redrock
Kimberly Poeling
Scottsdale
Kim Elliott
Nicole Kauffman

Maura Knoell
Katie Petersen
Ellen Wilson
Sedona

Julie Perreault
Tempe

Stephanie
Bayliss
Janet Romo
Laurie Shook

Tucson

Wendy Swartz
Kimberly

Williams
Yuma

Jennifer Delgado



Sonya Kanidis is this quarter's featured Parent Leader. She always goes above and beyond when assisting her parent-to-parent matches. Thank you, Sonya!

The Parent Leaders listed above participated in leadership activities from May through July 2018. We appreciate each of our 300 Parent Leaders, but we do not have room to list all of their names.

Raising Special Kids
5025 E Washington, Ste #204
Phoenix, AZ 85034

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JOIN US FOR AN EVENING OUT!



APRIL 2019

1	2	3	4	5	6
7	8	9	10	11	12
14	15	16	17	18	19
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28	29	30			