

## 409 - CONTRACTOR OFFICE OF INDIVIDUAL AND FAMILY AFFAIRS (OIFA)

EFFECTIVE DATE: 04/30/24, 10/01/25, 10/01/26

APPROVAL DATE: 02/08/24, 05/23/25, 04/29/26

### I. PURPOSE

This Policy applies to ACC, ACC-RBHA, ALTCS E/PD, DCS CHP (CHP), and DES DDD (DDD) Contractors. This Policy ~~outlines the~~ establishes Contractor requirements to ~~establish~~ develop, implement, and maintain a distinct Office of Individual and Family Affairs (OIFA) department.

### II. DEFINITIONS

Refer to the ~~AHCCCS Contract and Policy~~ ACOM and AMPM Dictionary<sup>1</sup> for common terms found in this Policy.

For purposes of this Policy, the following terms are defined as:

#### **MEMBER ADVOCACY COUNCIL (MAC)**

A council which provides opportunities for members and family members served by an AHCCCS health plan and other stakeholders to ~~participate in driving positive change~~ influence Contractor policy, service delivery, and system improvements<sup>2</sup>. The members of the ~~Member Advocacy Council (MAC)~~ shall reflect the membership population and communities served by an AHCCCS health plan. ~~The Council members gather and discuss issues and barriers, identify challenges, problem solve, share information, and strategize ways to strengthen service delivery.~~<sup>3</sup>

#### **OFFICE OF INDIVIDUAL AND FAMILY AFFAIRS (OIFA) ALLIANCE**

A designation for the collective group of OIFA Teams from each Contractor and AHCCCS OIFA who work together to coordinate statewide initiatives, standardize communication, and reduce duplication across the system.<sup>4</sup>

<sup>1</sup> Update title and link.

<sup>2</sup> Changed to specify expectations.

<sup>3</sup> Removed, duplicative with contract language.

<sup>4</sup> Adding definition for Office of Individual and Family Affairs Alliance (OIFA) to assist in understanding what the alliance is utilized for.

### III. POLICY

The Contractor shall establish and maintain an OIFA department with authority, independence, and organizational positioning to fulfill the AHCCCS OIFA mission and participate in statewide OIFA Alliance initiatives. ~~to support and fulfill the AHCCCS OIFA mission and strategic plan, and work in collaboration with the statewide OIFA Alliance initiatives.~~ The Contractor's OIFA department shall ~~promote recovery, resiliency, empowerment, and wellness.~~ For additional information, refer to the ~~AHCCCS Office of Individual and Family Affairs web page posted on the AHCCCS website—AHCCCS Info—Healthcare Advocacy~~ ensure that the voices of individuals with personal behavioral health experience are incorporated into Contractor governance, operations, quality improvement, and system design<sup>5</sup>.

#### A. CONTRACTOR RESPONSIBILITIES

The Contractor shall name an OIFA Administrator to lead the Contractor's OIFA department as specified in Contract. The Contractor shall ensure the OIFA Administrator: Establish and maintain an OIFA department to enhance and ensure the voices of those with lived experience are promoted, heard, and considered in policy planning and practice development.

1. Integrates a lived-experience perspective into the development, implementation, monitoring, and evaluation of all Contractor programs, policies, and procedures, and is empowered to:
  - a. Participate in organizational decision-making at the level necessary to influence outcomes,
  - b. Identify and escalate systemic issues to executive leadership team, and
  - c. Collaborate with the Contractor's executive leadership to promote recovery-oriented, person-centered practices.
  
2. Has the access, authority, and opportunity needed to participate in and provide input on all decisions and activities related to:
  - a. Peer Support Service provision and requirements, as specified in AMPM Policy 963,
  - b. Credentialed Family Support Service requirements, as specified in AMPM Policy 964,
  - c. Contractor relationships with Peer-Run Organizations and Family-Run Organizations, including development, coordination, and capacity-building, and
  - d. Formal mechanisms for stakeholder engagement, ensuring stakeholder input, concerns, and recommendations are collected, documented, and elevated to the Contractor's executive leadership team for review and action.<sup>6</sup>

- ~~1. Name an OIFA Administrator to lead the Contractor's OIFA department as specified in Contract. The Contractor shall ensure:~~
  - ~~a. The OIFA Administrator is located in Arizona and has lived experience receiving behavioral health services and/or lived experience as a family member who is a primary caregiver or natural support and experienced in navigating a public behavioral health system, and~~

<sup>5</sup> Changed to specify expectations.

<sup>6</sup> Changed to specify expectations.

~~The OIFA Administrator takes an overarching approach to incorporate the perspective of lived experience with behavioral health challenges in all programs, policies, and procedures.<sup>7</sup>~~

**A.B. THE OIFA ADMINISTRATOR RESPONSIBILITIES**

The OIFA Administrator, and sufficient staff under this position, shall:

1. Lead, communicate, and operationalize the vision and mission of the OIFA department, ensuring it is integrated into the Contractor’s programs, policies, and procedures.
2. Cultivate, strengthen, and build partnerships with individuals, families, youth, and community members to promote recovery, resiliency, and wellness across the Contractor’s service delivery system.
3. Assemble and facilitate the Member Advocacy Council (MAC) as specified in the Contract.
4. Participate in the Contractor’s Governance Committee as specified in the Contract.
5. Advocate for service delivery environments that are supportive, welcoming, person-centered, trauma-informed, and recovery-focused.
6. Develop, submit, and maintain an OIFA Strategic Plan in alignment with the AHCCCS OIFA Strategic Plan, as specified in Contract Section F, Attachment F3, Contractor Chart of Deliverables.
7. Oversee, compile, and submit all OIFA deliverables as required by the Contract, ensuring accuracy, timeliness, and compliance with AHCCCS expectations.
8. Collect, analyze, and interpret data to:
  - a. Monitor the provision of peer support services and family support services within the Contractor’s network,
  - b. Identify and address gaps in the network and barriers to care impacting access to peer support and family support services,
  - c. Assess needs for expansion or enhancement of peer support and family support services, and
  - d. Elevate identified concerns, trends, and systemic issues to AHCCCS as appropriate.
9. Guide and oversee the development, implementation, and monitoring of Peer-Run Organizations (PROs) and Family-Run Organizations (FROs) within the Contractor’s network. If the Contractor desires to Contract with an organization not currently recognized as a PRO or FRO by AHCCCS OIFA, and the Contractor believes the organization meets the definition and criteria, the Contractor shall submit a New PRO and/or FRO Request Form, utilizing Attachment A, as specified in Contract Section F, Attachment F3, Contractor Chart of Deliverables. The OIFA Alliance will evaluate the submitted attachment.

---

<sup>7</sup> Removed, duplicative language with contract.

10. Engage in cross-departmental collaboration to advance, support, and sustain workforce and service initiatives associated with Peer Recovery Support Specialists (PRSS), Credentialed Family Support Partners (CFSP), peer and family support services, Peer-Run and Family-Run programs, and additional priorities that build networks and enhance the quality of care for peers and family members.<sup>8</sup>

~~Direct and educate on the vision for the OIFA department ensuring its mission is integrated into the programs, policies, and practices of the Contractor,~~

- ~~a. Cultivate new relationships and nurture existing relationships to build partnerships with individuals, families, youth, and community members to promote recovery, resiliency, and wellness,~~
- ~~a. Assemble and facilitate a Member Advocacy Council (MAC). At a minimum a MAC shall include:
  - ~~i. Individuals enrolled with the Contractor and are receiving and/or have received behavioral health services,~~
  - ~~ii. Family members of individuals who are receiving and/or have received behavioral health services,~~
  - ~~iii. Professionals, and~~
  - ~~iv. Advocates.~~~~
- ~~Assist and participate in the Contractor's governance committee as specified in Contract,~~
- ~~b. Advocate for service delivery and environments that are supportive, welcoming, person-centered, trauma-informed, and recovery focused,~~
- ~~c. Develop a strategic plan in alignment with the AHCCCS OIFA strategic plan as specified in Contract Section F, Attachment F3, Contractor Chart of Deliverables,~~
- ~~d. Oversee the compiling and submission of OIFA deliverables as specified in Contract,~~
- ~~e. Collect and analyze required and ad hoc data on the provision of peer support services and family support services in the Contractor's network on a regular or ad hoc basis, and Have access to complete data for sufficient use in, at a minimum:
  - ~~i. Identifying gaps in the network and barriers to care for members accessing peer support services and family support services,~~
  - ~~ii. Assessing needs for expansion of peer support services and family support services into other areas,~~
  - ~~iii. Collaborating with the Contractor's Workforce Development Operation (WFDO) to identify potential challenges and threats to the viability of the Peer Recovery Support Specialists (PRSS) and Credentialed Family Support Partners (CFSP) workforce, and~~
  - ~~iv. Elevating any identified concerns to AHCCCS as appropriate.<sup>9</sup>~~~~

<sup>8</sup> Changed to specify expectations.

<sup>9</sup> Removed and reworded above to clarify expectations.

**B.C. OIFA ALLIANCE INVOLVEMENT**

In recognition of the interconnected relationships providers have with multiple health plans, the OIFA Alliance was created to reduce duplication and streamline communication between providers, health plans, and AHCCCS. The OIFA Alliance comprises all the Offices of Individual and Family Affairs (OIFA) in Arizona, including AHCCCS OIFA. The Contractor's OIFA Administrator participates in OIFA Alliance activities when all Contractor OIFAs participate with AHCCCS OIFA in shared statewide initiatives and projects. OIFA Alliance activities are identified and determined collectively by the OIFA Alliance. OIFA Alliance activities shall not be duplicative of OIFA Administrator's contractually required expectations. ~~These efforts fall under the purview of the OIFA Alliance when all Contractor OIFAs participate with AHCCCS OIFA in shared initiatives and projects. The Contractor's OIFA department shall participate in all OIFA Alliance-initiated activities.~~ These activities may include but are not limited to:

1. Improving and expanding oversight of the training and credentialing of PRSSs and CFSPs by:
  - a. Establishing rapport with recognized Peer Support Employment Training Programs (PSETPs)~~s~~ and Credentialed Family Support Training Programs (CFSTPs) training programs,
  - b. Adhering to shared criteria, processes, and procedures for selection and recognition of new PSETPs, and CFSTPs training programs, and
  - ~~c.~~ Reviewing curricula curriculum and monitoring activities of recognized PSETPs and CFSTPs training programs to ensure quality and availability of training programs for the Credentialed Peer and Recovery Support Specialists and Credentialed Family Support workforce Partners, by:
    - ~~i.~~ Requesting and receiving copies of AMPM Policy 963, Attachment C and AMPM Policy 964, Attachment B from recognized PSETPs and CFSP training programs upon completion of every class, and<sup>10</sup>  
Tracking employment placement for graduates of PSETPs and CFSP training programs.
- ~~2.~~ Guide the development, implementation, and monitoring of Peer-Run Organizations (PROs) and Family-Run Organizations (FROs).<sup>11</sup>
- ~~3.~~ 2. Other statewide initiatives as identified and determined undertaken by the OIFA Alliance as a whole.

All OIFA Alliance correspondence shall be directed to and communicated from AHCCCS OIFA [OIFAAlliance@azahcccs.gov](mailto:OIFAAlliance@azahcccs.gov).

**C.D. PEER AND FAMILY MEMBER INVOLVEMENT**

~~The peer~~ Peer and ~~the~~ family member involvement is an essential component of recovery-oriented and person-centered systems of care. The Contractor's OIFA shall establish structures and processes that actively seek, value, and incorporate input from individuals and family members.

<sup>10</sup> Removed, duplicative with language in Policy and Contract.

<sup>11</sup> Moved to section above and revised.

The Contractor's OIFA shall demonstrate how this input informs decisions, program improvements, and service delivery. ~~a dynamic set of activities and requires the Contractor, individuals and families served by the Contractor, to be open to creating trusting relationships based on shared goals. Providing opportunities for meaningful partnerships with individuals and families requires a commitment from the Contractor. The Contractor shall implement strategies so that the input and perspectives of peers and families are sought out, listened to, and acted upon. The Contractor shall measure the outcomes of peer and family member engagement initiatives.~~<sup>12</sup>

These structures and processes ~~activities~~ shall include, but are not limited to:

1. Ensuring peer and family perspectives are represented at all levels of the service delivery system, including planning, implementation, evaluation, and quality improvement.
2. Establish and facilitate a Member Advocacy Council as specified in contract to gather and utilize peer and family input on the Contractor's policy, service delivery, and system improvements. The Contractor shall submit the peer and family member committee participation and outcomes using Attachment B, as required in Contract Section F, Attachment F3, Contractor Chart of Deliverables.<sup>13</sup>
- ~~1.3.~~ Convening Regular Stakeholder Meetings to gather input, identify challenges and barriers, share information, and develop strategies to strengthen the service delivery system. Participants should include a broad spectrum of peers, family members, providers, Peer-Run Organizations (PROs), Family-Run Organizations (FROs), advocacy groups, AHCCCS OIFA and other stakeholders interested in system enhancement.
4. Promoting Opportunities for Involvement by identifying, creating, and sustaining opportunities for peer and family participation across workgroups, committees, recurring meetings, and ad hoc initiatives to ensure meaningful integration of peer and family perspectives.
5. Communicating and Collaborating with Peers and Families to identify concerns and remove barriers impacting service delivery or satisfaction, including but not limited to:
  - a. Tracking and trending issues, barriers, suggestions, and concerns, and
  - ~~a.~~ b. Reporting back to participants regarding how their feedback informed changes, improvements, or decisions.<sup>14</sup>
- ~~3.— the following principles of peer and family involvement in the design, and implementation of an integrated health care service delivery system:~~
- ~~4.— Sharing the same mission to place the member's whole health needs above all else,~~
  - ~~a.— Embedding member and family voice at all levels of the service delivery system,~~

<sup>12</sup> Changed to specify expectation.

<sup>13</sup> Changed to update deliverable requirements.

<sup>14</sup> Changed to clarify requirements of how participant feedback is utilized by the Contractor.

- ~~b. Ensuring members and family members have access to peer support and family support services delivered by individuals with lived experience as specified in AMPM Policy 963 and AMPM Policy 964, and~~
  - ~~c. Maximizing the use of PROs and FROs.~~
- ~~1. The Contractor shall submit a Roster of Peer and Family Committee Members, utilizing Attachment B, as specified in Contract, Section F, Attachment F3, Contractor Chart of Deliverables.~~
  - ~~2. Ensuring meaningful peer and family member participation on all the Contractor committees, except for those that pertain to issues of member and/or provider confidentiality. Every effort shall be made to ensure the composition of the committees is diverse and representative of the Contractor's current membership throughout the region with respect to the members' race, ethnic background, primary language, age, and Medicaid eligibility.~~
  - ~~3. Meeting, at least every six months with a broad spectrum of peers, family members, and providers including PROs and FROs, advocacy organizations, and any other individuals that have an interest in creating system enhancements. These meetings will be utilized to gather input, identify challenges and barriers, share information, and strategize on ways to strengthen the service delivery system. The Contractor shall invite AHCCCS OIFA to participate in these meetings.~~
  - ~~4. Identify and create other opportunities for member and family member participation including boards, workgroups and recurring and/or ad hoc meetings to ensure representation of the peer and family perspective in programs and services.~~
  - ~~5. Communicate and collaborate with members and families to identify concerns and remove barriers impacting service delivery or member satisfaction, by:
    - ~~a. Tracking and trending issues, barriers, suggestions, concerns, and~~
    - ~~b. Reporting back to the members and families who provided feedback which led to changes made, as a result of their participation.<sup>15</sup>~~~~

#### **~~D.E.~~ PEER SUPPORT SERVICES AND FAMILY SUPPORT SERVICES**

The Contractor's OIFA department shall have oversight of the provision of peer support services and credentialed family support services within their contracted Geographic Service Areas (GSAs). The Contractor's OIFA Administrator shall work participate in all auditing activities and corrective actions necessary to ensure that; ~~with the Contractor's network management, quality management, Workforce Development (WFD), and cultural competency departments to ensure:~~

- ~~1. A PRSS delivering peer support services fulfills all requirements in AMPM Policy 963 The providers employing Peer Recovery Support Specialists (PRSS) who deliver peer support services are fulfilling all requirements in AMPM Policy 963.~~

<sup>15</sup> Removed, duplicative with contract language.

2. ~~A delivering family support services fulfills all requirements in AMPM Policy 964. The providers employing Credentialed Family Support Partners (CFSP) and delivering family support services comply with all requirements in AMPM Policy 964.~~
3. ~~The peer support services, and the family support services meet the needs of the diverse populations served by the Contractor, including but not limited to specialized programs for ALTCS DDD and ALTCS E/PD members. An adequate system exists to address member needs across the lifespan including meeting unique health care needs of the member.~~<sup>16</sup>

The Contractor's OIFA Administrator shall utilize reports and any additional information ~~have access to utilization reports and other~~ necessary means to monitor, track, and trend network sufficiency and utilization for peer support services and family support services and address concerns identified.<sup>17</sup>

~~**E. PEER RUN ORGANIZATIONS AND FAMILY RUN ORGANIZATIONS**~~

~~**F.** The Contractor shall contract with PROs and FROs, as specified in Contract. The Contractor shall ensure that providers are educated on the role of the PROs and FROs and inform members on the availability of peer support and family support services within the PROs and FROs.~~

~~**G.** The Contractor shall ensure members have access to services available at the PROs and FROs. These services assist with understanding how to effectively utilize the service delivery system to access the covered benefits.~~

~~**H.**~~

~~If the Contractor desires to contract with an organization not currently recognized as a PRO or FRO by AHCCCS OIFA, and the Contractor believes the organization meets the definition and criteria, the Contractor shall submit a New PRO and/or FRO Request Form, utilizing Attachment A, as specified in Contract Section F, Attachment F3, Contractor Chart of Deliverables. The OIFA Alliance will evaluate the submitted attachment.~~<sup>18</sup>

<sup>16</sup> Changes to specify expectations.

<sup>17</sup> Changed to provide clarification.

<sup>18</sup> Relocated pertinent information above and removed duplicative found in contract.