

964 - CREDENTIALLED FAMILY SUPPORT PARTNER REQUIREMENTS

EFFECTIVE DATES: 07/01/16, 10/01/18, 10/01/19, 10/01/20, 10/01/22, 10/01/23, 10/01/24, 10/01/25, 10/01/26

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I. PURPOSE

This Policy applies to ACC, ACC-RBHA, ALTCS E/PD, DCS CHP (CHP), and DES DDD (DDD) Contractors; Fee-For-Service (FFS) Programs including: the American Indian Health Program (AIHP), Tribal ALTCS, TRBHA; and all FFS populations, excluding Federal Emergency Services Program (FESP). (For FESP, refer to AMPM Chapter 1100). This Policy establishes requirements for training and credentialing standards for individuals seeking employment as a Credentialed Family Support Partner (CFSP) in the AHCCCS programs.

II. DEFINITIONS

Refer to the [AHCCCS Contract and Policy ACOM and AMPM Dictionary](#)¹ for common terms found in this Policy:

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

CREDENTIALLED FAMILY SUPPORT PARTNER (CFSP)

An individual who is qualified under this policy and has passed an AHCCCS recognized Credentialed Family Support Partner (CFSP) Training Program to deliver Family Support Services as a CFSP.

CREDENTIALLED FAMILY SUPPORT PARTNER TRAINING PROGRAM (CFSPTP)

An AHCCCS recognized credentialing program in compliance with competencies and requirements as specified in this Policy.

~~CREDENTIALLED TRAINER~~
CREDENTIALLED FAMILY SUPPORT PARTNER TRAINER²
(CFSPT)

An individual who identifies as having lived experience as specified in this Policy and provides training to individuals seeking employment as a Credentialed Family Support Partner (CFSP).

FAMILY SUPPORT SERVICES

~~A home care training (family support) with family member(s) directed toward restoration, enhancement, or maintenance of the family functions to increase the family's ability to effectively interact and care for the individual in the home and community.~~³

¹ Revised to update dictionary name change.

² Revised for accuracy.

³ Relocated to incorporate into overview.

NATURAL SUPPORTS

The personal associations and relationships that typically develop intentionally and/or organically in the community. These relationships enhance the quality of life for individuals and provide voluntary support to help an individual achieve personal goals and desired outcomes. Natural supports may include family members, friends, neighbors, coworkers, community members, and anyone else identified by the member, including organizations that serve the public.

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

A collaborative of all OIFAs in Arizona, including AHCCCS OIFA, that oversee the compliance determination and recognition process for Arizona's Credentialed Family Support Partner Training Programs (CFSPTPs).

III. POLICY

A. OVERVIEW

~~The Family members are an integral part of the behavioral health workforce. The Family members shall meet criteria for obtaining a CFSP credential from an AHCCCS-recognized Credentialed Family Support Partner Training Program (CFSPTP) as a prerequisite for credentialing in compliance with this Policy. The Credentialing as specified in this Policy is required for reimbursement of Family Support Services delivered by a CFSP, refer to the AHCCCS Medical Coding Resources website for applicable billing and coding.~~

~~No Family Support Services provided by a CFSP to FFS members shall be paid through AHCCCS DFMS unless provided by a provider who has met the credentialing requirements within this policy.⁴~~

Family members are ~~an integral~~ a critical part of the members' wellness, recovery, and resiliency journey and are an integral part of the behavioral health workforce. Family support services are directed toward restoration, enhancement, or maintenance of the family functions to increase the family's ability to effectively interact and care for the individual in the home and community. ~~The importance of the peer to peer relationship of family members are recognized by AHCCCS OIFA.⁵~~ The Credentialing, as specified in this Policy, is required for reimbursement of Family Support Services delivered by a CFSP. Refer to the AHCCCS Medical Coding Resources website for applicable billing and coding. Family Support Services provided by a CFSP to Fee-For-Service (FFS) members shall only be paid through AHCCCS Division of Fee-for-Service Management (DFSM) if provided by an individual who has met the credentialing requirements within this policy.⁶ The Contractors and ~~FFS~~ providers servicing FFS members⁷ shall ensure the provision of quality Family

⁴ Removed for updated language.

⁵ Removed, not relevant.

⁶ Incorporated language from above.

⁷ Revised language throughout the policy to clarify that providers serve both FFS and MCO members as opposed to the provider being FFS only.

Support Services are promoted as an essential part of integrated care within the AHCCCS Adult System of Care (ASOC) and Children System of Care (CSOC).

1. Family Support Services include but are not limited to assisting the family with:
 - a. Adjusting to the member's needs,
 - b. Developing skills to effectively interact, and/or guide the member,
 - c. Understanding the causes and treatment of behavioral health challenges,
 - d. Understanding effective utilization of the delivery system, and
 - e. Planning for ongoing and future support(s) for the member and the family.

~~2. More than one provider may provide Family Support Services to a member at the same time, if indicated by the member's clinical needs and identified within their service plan. Multiple providers may concurrently deliver separate Family Support Services to family members on the same day, provided the services are clinically indicated for the member and identified in the member's service plan.⁸~~

Contact OIFA@AZAHCCCS.gov for information on AHCCCS recognized Credentialed Family Support Partner Training Programs (CFSPTPs).⁹

B. CREDENTIALLED FAMILY SUPPORT PARTNER AND TRAINER QUALIFICATIONS

~~The credentialed Family Support is the peer to peer support relationship available to primary caregivers of Medicaid-eligible children and natural supports of Medicaid-eligible adults. Eligible individuals can be credentialed as CFSPs by AHCCCS recognized CFSPTPs. Family members who want to become CFSPs and trainers must meet the following criteria:¹⁰~~

1. To be eligible for credentialing, the individual shall meet at least one of the following requirements:
 - a. A parent or primary caregiver with lived experience who has raised or is currently raising a child with mental health disorders and/or Substance Use Disorders (SUD) or comorbidity of these disorders, or
 - b. An individual who has lived experience as a primary natural support for an adult with mental health disorders and/or SUD, or comorbidity of these disorders.¹¹~~SUD.~~
2. ~~All individuals employed as CFSP trainers in the ASOC or CSOC shall meet the definition of a family member.~~ Individuals are eligible to be a Credentialed Family Support Partner Trainer (CFSPT) if they meet at least one of the above criteria and all of the following requirements:¹²
 - ~~a. Have lived experience as an adult who is the primary supporter of a child or the primary supporter of an adult.¹³~~
 - b.a. Have Aa minimum of one year experience in delivering family support, the role of a family support partner, and

⁸ Revised to add additional clarification that more than one service can be provided in the same day by different providers.

⁹ Relocated information from Section B for continuity.

¹⁰ Reworded for clarity that family members must meet these criteria.

¹¹ Added for Clarity and to remove disorder.

¹² Reworded to clarify that individuals must meet both above and below requirements.

¹³ Reworded and added above.

- ~~e.b. Have experience navigating across multiple systems that impact children, adults, and families. Have had experience navigating the ASOC and/or CSOC.~~¹⁴
3. The individuals seeking credentialing as a CFSP shall complete and pass a final exam administered by the CFSPTP training program¹⁵ with a minimum score of 80% upon completion of the required training.

COMPETENCY EXAM

~~The individuals seeking employment as a CFSP shall complete and pass a final exam with a minimum score of 80% upon completion of the required training. Each CFSPTP has the authority to develop a final exam. However, all exams shall include questions related to each of the curriculum core elements as specified in this Policy. The providers employing CFSP who provide Family Support Services are required to ensure that its employees are competently trained to work with the populations served.~~¹⁶

D. PROCESS FOR SUBMITTING EVIDENCE OF CREDENTIALING AND REPORTING

All providers delivering Medicaid reimbursable Credentialed Family Support ~~are~~ services are¹⁷ required to maintain current and ongoing documentation as specified in this policy.

Verify AHCCCS registered providers operating a CFSPTP shall submit all required information on Form 964B via the AHCCCS Quality Management (QM) Portal within 30 days of the graduation/credentialing. These reports shall contain no other identifying information apart from what is required.¹⁸

1. The Contractor shall:
- a. Develop policies and procedures and make them available to providers,
 - b. Describe monitoring and auditing/oversight activities and where records specific to supervision and training of CFSP are reviewed and maintained,
 - ~~a.c. Ensure the~~ Ensure providers use the AHCCCS ~~Quality Management (QM)~~ Portal Form 964A, located on the AHCCCS website <https://qmportal.azahcccs.gov/Account/Login.aspx> to enter information documenting the qualifications and credentials of CFSP,
 - ~~b.d.~~ Provide AHCCCS QM Portal training on a regular and ongoing basis to provider agencies reporting CFSP involvement in service delivery utilizing Form 964A,
 - ~~c. Develop policies and procedures and make them available to providers,~~
 - ~~d. Describe monitoring and auditing/oversight activities and where records specific to supervision and training of CFSP are reviewed and maintained,~~
 - e. Report information noting CFSP involvement in service delivery as specified in Contract, utilizing the QM portal Form 964A¹⁹,

¹⁴ Relocated into new Section I following core elements.

¹⁵ Revised to specify responsibility for final exam.

¹⁶ Relocated into qualifications for credentialing.

¹⁷ Revised to clarify which providers qualify.

¹⁸ Changes made to align to reporting requirements in AMPM Policy 963.

¹⁹ Removed duplicated.

- f. Ensure providers maintain documentation of required qualifications and credentials for CFSP and shall ensure copies of credentials are made available upon request, and
 - g. Conduct quarterly quality checks within the QM Portal to monitor the accuracy of the Form 964A submission.
2. All AHCCCS recognized CFSPTPs shall:
 - a. Make curriculum materials available to members of the OIFA Alliance and/or AHCCCS DFSM upon request, and
 - b. Complete Form 964B utilizing the AHCCCS QM Portal <https://qmportal.azahcccs.gov> within 30 days of the graduation/credentialing.
- ~~1. AHCCCS OIFA shall:~~
- ~~a. Conduct quarterly quality checks within the QM Portal to monitor the accuracy of the Form 964B submission, and~~
 - ~~b. a. Provide regular and ongoing training for the submission of Form 964B into the QM Portal for CFSPTP operators.²⁰~~
3. The FFS providers servicing FFS members shall ensure CFSP's have the necessary skills to deliver high-quality service, including relevant training and credentials, as required in this policy, to provide lived experience support to members.²¹ The FFS providers servicing FFS members shall maintain documentation of required qualifications and credentials for CFSP, utilizing Attachment A, and ensure copies of credentials are available upon request.

E. RECIPROCITY

~~The~~ AHCCCS OIFA recognizes credentials issued by other states and/or training programs. Individuals credentialed in another State shall submit their proof of credentialing to AHCCCS OIFA, via email at oifa@azahcccs.gov.

F. CONTINUING EDUCATION AND ONGOING LEARNING REQUIREMENTS

~~The ongoing training requirements of current best practices, like other practitioners, shall be established by the Contractor for individuals employed as CFSP to obtain continuing education and ongoing learning relevant to family support.~~²²

The Contractor shall ~~develop policies and procedures and make them available to providers~~ ensure all individuals employed as CFSPs have access to and obtain a minimum of eight hours of continuing education and ongoing learning relevant to family support per year. ~~The policies and procedures shall describe requirements for individuals employed as CFSPs that include a minimum of eight hours of continuing education and ongoing learning relevant to family support, per year.~~²³

At least one hour shall cover ethics and boundaries related to the practice of family support.

²⁰ [Removed to reflect Contractor responsibility.](#)

²¹ [Updated for clarity.](#)

²² [Removed for clarity.](#)

²³ [Updated for clarity.](#)

~~F.~~ G. SUPERVISION OF CREDENTIALLED FAMILY SUPPORT PARTNER

~~The Contractor shall establish the amount and duration of supervision hours of CFSP and follow the requirements outlined below:~~

~~^{1.} All providers employing CFSP shall provide supervision by an individual qualified as a Behavioral Health Technician (BHT) or Behavioral Health Professional (BHP). The supervision shall be appropriate to the services being delivered and the qualifications of the CFSP as a Behavioral Health Paraprofessional (BHPP) or BHT. The supervision shall be documented, and inclusive of both the clinical and the administrative supervision as specified in AMPM Policy 310-B.~~

~~2. Provide supervisors of CFSP access to training and ongoing learning relevant to the supervision of CFSPs and the delivery of family support services.~~

~~Develop and make available to the providers its policies, procedures, and resources for establishing supervision requirements and any expectations related to Contractor monitoring/oversight activities. To receive Medicaid reimbursement for Credentialed Family Support services, the individual providing the service shall possess a CFSP credential from an AHCCCS-recognized CFSPTP and receive supervision as specified in the AHCCCS Covered Behavioral Health Services Guide (CBHSG). Refer to AMPM Policy 310-B and the AHCCCS Fee-For-Service Provider Billing Manual for further details on billing limitations.~~

- ~~1. The Contractor and providers serving FFS members shall ensure:~~
 - ~~a. The providers have policies and procedures to establish the minimum professional, educational and/or experiential qualifications for Behavioral Health Paraprofessionals (BHPPs) and Behavioral Health Technician (BHTs),~~
 - ~~b. The provider policies and procedures establish the minimum required amount and duration of supervision for CFSPs qualifying as BHPPs and BHTs,~~
 - ~~c. The supervision is documented and inclusive of both clinical and administrative supervision,~~
 - ~~a.d. The supervisors of CFSP have access to training and ongoing learning relevant to the supervision of CFSPs and the delivery of Credentialed Family Support, and~~
 - ~~b.e. Supervisors of CFSPs report any misconduct by CFSPs through appropriate and applicable channels.²⁴~~

~~H.~~ G. CREDENTIALLED FAMILY SUPPORT PARTNER EMPLOYMENT TRAINING CURRICULUM STANDARDS

1. A CFSPTP curriculum shall include the minimum following core elements:
 - a. Overview of system history and knowledge of the Arizona behavioral health system that resulted in system transformation:
 - i. Arizona Vision (Jason K. Lawsuit),
 - ii. Jacobs Law,
 - iii. Arnold v. Sarn,
 - iv. Adult System of Care (ASOC) - Nine Guiding Principles,

²⁴ Section revised to align with AMPM Policy 963.

- v. Adult Recovery Team (ART),
 - vi. Children’s System of Care (CSOC) – Twelve Guiding Principles,
 - vii. Child and Family Team (CFT),
 - viii. The CSOC levels of care,
 - ix. Medicaid covered services, ~~and~~
 - x. Rights of the caregivers and
 - ~~x~~.xi. individual rights of members.
- b. Lifecycle Transitions:
- i. Transition aged youth, and
 - ii. Guardianship:
 - 1) Type(s) – (e.g., Power of Attorney, Advance Directives), and
 - 2) Process of applying (rules and requirements).
 - iii. Timelines of transition to adulthood into the ASOC, and
 - iv. Role changes when bridging the CSOC and ASOC at transition for the individual, family, and CFT.
- c. System Partner Overview:
- i. Understanding of DDD three categories of eligibility (DD-Only, Targeted Case Management, ALTCS) and procedures, covered services, knowledge of the DDD Subcontracted Health Plans and ALTCS E/PD Program,
 - ii. Refer to AMPM Policy 585 for CHP system overview, involvement, and collaboration, understanding the CFSP and member/family role(s) for children in the Department of Child Safety (DCS) care, education, navigation, support, and advocacy with members and families involved in DCS care,
 - iii. The Office of Human Rights ([OHR](#)) and Special Assistance (~~OHR~~), as specified in AMPM Policy 320-R
 - iv. The Office of Individual and Family Affairs (OIFA),
 - v. Introduction to the Americans with Disabilities Act (ADA),
 - vi. Introduction to Social Security Income (SSI)/Social Security Disability Insurance (SSDI):
 - 1) Payee services, and
 - 2) Vocational rehabilitation services and available training (e.g., DB101.org).
 - vii. Introduction to the criteria and processes (application, timelines, services, rights, and benefits) for a Serious Emotional Disturbance (SED) and Serious Mental Illness (SMI) designation,
 - viii. Introduction to the criteria and processes (application, timelines, services, and rights) for Court Ordered Evaluation (COE) and Court Ordered Treatment (COT), and
 - ix. Crisis Services:
 - 1) Crisis planning and prevention,
 - 2) Crisis centers,
 - 3) Crisis Mobile Teams, and
 - 4) Crisis Intervention Training.
- d. Advocacy and Empowerment:
- i. Family and peer movements and the role of advocacy in systems transformation,
 - ii. Building collaborative partnerships and relationships:
 - 1) Engagement, identification, and utilization of strengths, and
 - 2) Utilization and modeling of conflict resolution skills and problem-solving skills.
 - iii. Understanding of:
 - 1) Individual and family culture, biases, stigma, and systems’ cultures, and
 - 2) Trauma informed care approaches.

- iv. Natural/Informal supports – identifying, building, and connecting individuals and families, including families of choice, to community and natural supports,
- v. Healthcare equity and accessibility and
- vi. Empowerment:
 - 1) Empowerment of family members and other supports to identify their needs, promote self-reliance,
 - 2) Identification of understanding of the stages of change, and unmet needs, and
 - 3) Identification of barriers; family, system, social, emotional, physical, and using effective advocacy skills to overcome barriers.
- e. Practice of Support:
 - i. Communication techniques:
 - 1) Individuals first, strengths-based language, using respectful communication, demonstrating care and commitment,
 - 2) Active listening skills, demonstrating empathy, provide empathic responses, differentiation between sympathy and empathy, listening non-judgmentally, and
 - 3) ~~Use of~~Use self-disclosure effectively and sharing one’s own story for the benefit of the member.
 - ii. Wellness – Understanding of:
 - 1) The stages of grief and loss,
 - 2) Self-care and stress management,
 - 3) Compassion fatigue, burnout, and secondary traumatic stress,
 - 4) Resiliency and recovery, and
 - 5) Healthy personal and professional boundaries.
- 2. A CFSPTP shall not duplicate training required of individuals for employment with a licensed agency or Community Service Agency, (CSA). Training elements in this Policy are specific to the CFSP role in the AHCCCS programs and instructional for CFSP interactions.
- 3. The Contractor shall develop and make available policies and procedures as well as additional resources for development of curriculum, including Contractor staff contacts for questions or assistance.

I. COMPETENCY EXAM

Each CFSPTP has the authority to develop a final exam. However, all exams shall include questions related to each of the curriculum core elements as specified in this Policy. The providers employing CFSP who provide Family Support Services are required to ensure that its employees are competently trained to work with the populations served.²⁵

J.H. CREDENTIALLED FAMILY SUPPORT PARTNER TRAINING PROGRAM APPROVAL PROCESS

- 1. AHCCCS registered providers, Contractors, and/or community-based training programs may apply to operate as a CFSPTP by submitting a request to OIFAlliance@azahcccs.gov²⁶.

²⁵ Relocated from above.

²⁶ Update to provide contact information.

2. A CFSPTP shall submit its program curriculum, competency exam, and exam-scoring methodology (including an explanation of accommodations or alternative formats of program materials available to individuals who have special needs) to AHCCCS OIFA, at OIFA@azahcccs.gov. AHCCCS OIFA shall issue feedback or approval of the curriculum, competency exam, and exam-scoring methodology following the completed submission via email.
3. A CFSPTP curriculum shall not be combined with any other training and shall be recognized as a stand-alone program. A CFSPTP curriculum shall be specific to the delivery of Family Support Services.
4. If a CFSPTP makes substantial changes including changes to content, curriculum hours, competency exam/exam scoring, or if there are additional required elements, the training program shall submit the updated content to AHCCCS OIFA, at OIFA@azahcccs.gov for review and approval before the changed or updated curriculum is to be utilized.
5. Approval of the curriculum, competency exam, and exam-scoring methodology is based on the elements required in this Policy.

If a CFSPTP requires regional or culturally specific training exclusive to a Geographic Service Area (GSA) or specific population, the specific training cannot prevent employment or transfer of CFSP credentials based on the additional elements or standards.

6. A CFSPTP operator shall ensure that the curriculum is maintained and revised to align with current Contract and AHCCCS policies.
7. The CFSPTP shall submit any updated curriculum content to AHCCCS OIFA, at OIFAalliance@azahcccs.gov for review and approval before the changed or updated curriculum is to be utilized.