

**Arizona Department of Health Services
 Division of Behavioral Health Services
 PROVIDER MANUAL
 Community Partnership of Southern Arizona (CPSA Edition)**

Section 10.19 Rural Service Provider Protocol

I. Purpose:

- To ensure there are clear expectations in the areas of network standards, in remote areas and improve communication between the Networks and their subcontractors.
- To ensure there is accessibility and availability of all covered services within the rural areas of Pima County.

Network Responsibilities	Rural Subcontractor/Provider Responsibilities	CPSA Responsibilities
1. Maintain a physical presence in their designated rural geographic subdivision either through a network or subcontracted provider.	1. As the subcontractor for rural services the provider must have a physical presence in their designated geographic subdivision.	1. CPSA will require each rural provider provide a listing of locations and hours of operation. Also each provider will include the number of staff and their credentials for each location.
2. There must be availability for intakes for all TXIX/TXXI and NTXIX persons with SMI in each rural geographic subdivision. Capped contracts do not allow for the flow of referrals as required by the Provider Manual.	2. As the subcontractor for rural services the provider must serve all TXIX/TXXI persons as outlined in the Provider Manual.	2. CPSA will monitor the availability of intake appointments through periodic “secret shopper” phone calls and through review of member service compliant calls.
3. Initial Assessments and screenings must be available each rural geographic subdivision.	3. As the subcontractor for rural services the provider must have the capacity to provide initial assessments and financial screenings to all TXIX/TXXI persons.	3. CPSA will pull quarterly data related to the number of assessments provided within the rural geographic subdivisions. This information will be broken down by provider.
4. As the designated service provider rural geographic subdivisions the network must ensure an array of covered services is available within the subdivision. At a minimum this will include outpatient, in home, psychiatric and medication management.	4. As the subcontractor for rural services, the provider must have the capacity to provide an array of covered services that at a minimum will include outpatient, in home, psychiatric and medication management.	4. CPSA will pull quarterly data to review the utilization of services within the rural geographic subdivisions. This information will be broken down by provider.

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5. As the designated service provider for rural geographic subdivisions the network must ensure the availability of weekend and evening services. These must mirror that of their other intakes sites.	5. As the subcontractor for rural services the provider must have the capacity to offer weekend and evening services.	5. CPSA will monitor the availability of weekend and evening services through periodic “secret shopper” phone calls.
6. As the designated service provider for rural geographic subdivisions the network must ensure coordination and communication with the rural service provider. This will include at a minimum quarterly meetings with the provider, dissemination of provider manual updates, audits, satisfaction surveys.	6. As the subcontractor for rural services the provider must follow all guidelines as a subcontracted provider including but not limited to: the Provider Manual, CPSA Program Protocols, terms and conditions of their contract, etc.	6. CPSA will complete the rural services meeting by July 30, 2006. A rural services meeting with CPSA will take place by October 30, 2006. CPSA will require a bi yearly report on the provision of rural services. The first report will be due January 30, 2007.
7. The network is responsible to provider oversight and monitoring of the rural provider. This oversight will be consistent with the oversight provided they provide to their non rural sites.	7. The subcontractor is responsible to maintain ongoing communication and coordination with their contractor.	7. CPSA will assign an adult or children’s services specialist to monitor the established protocol and be available to provide ongoing technical assistance.

** The only information coming directly from CPSA to these subcontractors will be related to CPSA’s AFF and COOL contracts.