

PART II: Response Activities From Date of Incident

7. Describe State and local crisis counseling activities from the date of the incident to the date of this application. Enter "N/A" if no crisis counseling activities have been conducted to date.

The Arizona Health Care Cost Containment System (AHCCCS) serves Arizona as the Single State Agency (SSA), State Mental Health Authority and as the Medicaid agency for Arizona. While we have a robust Public Behavioral Health System serving individuals qualifying for Medicaid programs with current Federal Block Grants including the Mental Health Block Grant (MHBG) and the Substance Abuse Block Grant (SABG) as well as State-only programs for crisis and services for individuals deemed Seriously Mentally Ill (SMI), the emergency posed by COVID-19 Emergency is unprecedented locally, nationally and globally.

This presents novel challenges that are unable to be met by current Arizona resources:

- **One example is that the brief individual and group crisis counseling in the Immediate Services Program (ISP) and the Regular Services Program (RSP) allows for anonymity and is not tied to an individual Arizonan or does not require traditional progress note/charting. This is critical to maximize help seeking behavior for all Arizonans as well as to target specific sub-groups who have especially been impacted by the COVID-19 Emergency. AHCCCS has been able to do an emergency needs assessment to identify specific sub-groups and high risk individuals.**
- **Arizona has seen a spike in COVID-19+cases and an increase in deaths across the state**
- **The Arizona Department of Health Services publishes a COVID-19 dashboard that includes several metrics and AHCCCS has used the information from the dashboard to inform some of the responses to the RSP Grant Application**
- **Arizona launched Crisis Counseling Program/Immediate Services Program services on June 22, 2020 after being awarded the CCP/ISP Grant Award and noticed on June 3rd, 2020 of an award dated June 2nd, 2020:**
 - **AHCCCS partnered with the Crisis Response Network (CRN) to provide crisis counseling services. AHCCCS initiated a contract with CRN to implement, manage and oversee the crisis counseling services and activities. CRN contracted with 6 Subcontractors/Providers who provide services across the state of Arizona. The CCP services are available to anyone who has been impacted by the COVID-19 Emergency. The services are provided in safe and accessible telephonic and virtual locations. Services include individual and group counseling, supportive education, development of coping skills, assessment, referral and resource linkages**
 - **Counselors assist by helping individuals with social and emotional connections, assisting with stress management, helping individuals and families with effective coping strategies and promoting resilience**
 - **CRN created Resilient Arizona Crisis Counseling Program and by calling 2-1-1, a person can connect to an Arizona Crisis Counseling Provider**
 - **The 2-1-1 line is receiving calls and has been serving individuals in accessing crisis counseling since launching on June 22, 2020**

If an Immediate Services Program (ISP) was implemented for this disaster, please answer questions #8–10 below. Otherwise, skip to question #11.

8. Please provide a brief summary of the ISP currently in place. Please include information on the population served, any extensions (date and amount), the number of providers, and the start and end dates of the program, and summarize any trends. Include any best practices as well as any challenges and describe how those challenges were addressed or will be addressed in the RSP.

AHCCCS was awarded the Crisis Counseling CCP/ISP Grant and received notice on 6.3.2020 for an award approval dated 6.2.2020. AHCCCS and the Crisis Response Network(CRN)/Contractor have been in the process of implementing the CCP/ISP services since the date of award. AHCCCS was awarded \$532,804.00 for the CCP/ISP Grant. The performance period is 4.30.2020-6.29.2020.

AHCCCS has requested a no cost CCP/ISP automatic 30 day continuation from the date of 6.29.2020 extending the period to 7.29.2020 and will most likely submit an extension from that date depending on the outcome of the RSP application (award approval and date of notice).

Arizona has identified the following COVID-19 Emergency needs and actions necessary in order to ameliorate the mental and emotional crises caused by the COVID-19 Emergency and its subsequent psychological and behavioral conditions.

In addition, Arizona continues to see an increase in COVID-19 Cases and COVID-19 Deaths. Per the Arizona Department of Health Services Dashboard updated daily, there have been 63,030 COVID-19+cases in Arizona and 1490 COVID-19 deaths (6.25.2020 ADHS Dashboard).

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The CCP/ISP and the Regular Services Program (RSP) will allow for the continuation of the following:

- **Promote resiliency of Arizonans through general and targeted public education/public service announcements aimed at reduction of untoward effects of direct and indirect trauma experienced from COVID-19 through connection to available resources**
- **Launching of public service announcements on resources for the Crisis Counseling Program include the following subpopulations uniquely impacted by COVID-19:**
 - **Healthcare workers**
 - **Caregivers of children in the custody of the Arizona Department of Child Safety (DCS); families and foster care**
 - **American Indians: American Indians are approximately 5% of Arizona's population whereas American Indians represent 9% of COVID-19+cases and 18% of deaths due to COVID-19 in the state of Arizona (Arizona Department of Health Services Dashboard data-ADHS-6.25.2020)**
 - **Arizonans aged 65 and older: Persons 65 and older represent 8049 of COVID-19+cases and 1118 out of 1490 deaths due to COVID-19 in the state of Arizona (ADHS Dashboard data-6.25.2020)**
 - **Launch public service announcements on the "Doctor is In" Campaign designed to educate and promote help seeking behavior; the "Doctor is In" Campaign was launched by AHCCCS in May 2020 to educate and promote help and health seeking behavior. The campaign is on the AHCCCS website and encourages the public to seek regular health care to promote wellness**
 - **Educate parents through the provision of direct links to tools to manage common childhood behavior in the home with the goal of promoting pro-social behavior; PAXIS Tools**
 - **Educate the public about how to access behavioral health resources for the CCP through public service announcements, media ads, web banners and outreach activities**
- **Utilize Adult and Child Specialists to conduct targeted outreach and education:**
 - **The Child Specialist will establish and maintain cooperative relationships with representatives of community and child serving agencies including Department of Child Safety (DCS) and Arizona Department of Education (ADE). Will provide education to families and child serving stakeholder including providing culturally sensitive education and training about the effects of trauma on young children and their families:**
 - **During the ISP period, the Child Specialist is employed by the Family Involvement Center and will be outreaching to various groups to educate them on how to access Crisis Counseling Services and provide training on the effects of trauma on young children and families. Outreach may be done through established community coalitions, focus groups and town halls. The Child Specialist will continue to be employed by the Family Involvement Center for the RSP**
 - **The Adult Specialist will establish and maintain cooperative relationships with representatives of the community and adult serving agencies including Arizona Department of Housing, Department of Veterans Affairs, and Department of Health. Will provide education to adults including culturally sensitive education targeted toward COVID-19 populations that are at higher risk for morbidity and mortality due to COVID-19 in Arizona, including American Indians:**
 - **During the ISP period, the Adult Specialist is employed by the Crisis Response Network and will be outreaching to various groups to educate them on how to access Crisis Counseling Services and provide training on the effects of the COVID-19 emergency on targeted groups. Outreach may be done through established community coalitions, focus groups and town halls. The Adult Specialist will continue to be employed by CRN for the RSP**
 - **Provide individual counseling, group counseling, and assessment, referral and resource linkage via virtual means (telephonic and telehealth) given COVID-19 physical distancing promotion with a specific focus on:**
 - **Health Care Workers, Front Line Staff, Community Based Workers, Crisis Line and Mobile Team Workers, Extended Care Facilities and Congregate Facilities (Grief and Loss due to COVID-19 deaths) and those staff who are member facing**
 - **Caregivers of children in DCS**
 - **Native populations**
 - **Arizonans 65 and older**
 - **Utilize existing provider agencies in order to provide services immediately within the emergency period**
 - **Utilize centralized triage for individual/group based CCP Counseling and oversight**
 - **Leverage Behavioral Health providers across the state to provide culturally competent, confidential, individual and group based crisis counseling, assessment, referral and resource linkage**
 - **The ISP program has been composed of crisis counselors, also known as Behavioral Health Technicians (BHT's) supervised by Team Leads of Behavioral Health Professionals (BHP's) through existing behavioral health providers in Arizona**
 - **The ISP program has been utilizing behavioral health providers who have knowledge, experience and a long history of responding to the needs of the subpopulations impacted by the COVID-19 emergency including American Indians and those Arizonans over the age of 65. They also have experience responding to the needs of health care workers and providing supports to staff who are struggling with the demands of providing emergency, crisis and counseling services**

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- Arizona will also leverage Peer and Family members by working within established Peer and Family Run Agencies. Peer and Family Run Agencies have knowledge and expertise given their community based experience working with individuals and families with behavioral health conditions
 - There has been an increase in individual substance use throughout the state since the COVID-19 Emergency was declared
 - The AHDS Opioid Interactive Dashboard indicates the following:
 - Methamphetamine overdoses: 47% for ages 25-44 and 36% for ages 45-64
 - Heroin overdoses: 63% for ages 25-44 and 17% for ages 45-64
 - Maricopa County has experienced the highest increases in overdoses
 - CRN and the Providers have the capacity to provide Peer Supports for this subgroup through their Peer and Family Run Agencies and have staff who can address these needs and provide peer support, referral and resource linkages to support groups and other virtual means of support
- The Resilient Arizona Crisis Counseling Program was launched on 6.22.2020 and, in the first 6.5 hours of operation, 22 referrals were made to the 6 Subcontracted Providers from the 211 line. In addition, since launching on 6.22.2020, 90 individuals were referred from 211 specialists to a Crisis Counseling Program provider
- Reports from the Crisis Response Center also indicates there has been an increase in calls related to depression and anxiety.
- *CRN launched public services announcements beginning 6.22.2020 on their website with web ads/banners for the 211 RESILIENT-Arizona Crisis Counseling Program*
- *AHCCCS put information on their website and information is also on the Arizona Department of Health Services (ADHS) website to assist the public in accessing CCP services*
- *A Press Release was also published on 6.24.2020 to launch education about the Crisis Counseling Program. The following websites display public services education and information regarding the Crisis Counseling Services:*
 - resilientarizona.org
 - www.azahcccs.gov and www.adhs.gov
 - *As of June 26, 2020, three media interviews have been scheduled including a national media segment and two local market news programs. CRN has coordinated a statewide marketing campaign that is starting to run. All provider network organizations are trained and capable of delivering complete services, submitting data reports, and conducting programmatic outreach in their local communities.*

Funding from the RSP Award will allow for the continuation of the 2-1-1 Resilient Arizona Crisis Counseling Program line which is only funded through June 29th 2020.

9. If applicable, explain why any service providers not included in the ISP were added to this RSP application. Additionally, explain why any service providers included in the ISP are excluded from the proposed RSP.

- **AHCCCS will continue to contract with the Crisis Response Network (CRN) for the duration of the RSP Grant.**
- **CRN will continue to implement and oversee the CCP services with their Subcontractors/Providers**
- **CRN will continue to contract with the following Subcontractors/Providers:**
 - Crisis Preparation and Recovery
 - EMPACT
 - LaFrontera
 - The Guidance Center
 - The Family Involvement Center
 - RI, International

10. Describe how the RSP will build on the work done in the ISP. Describe how contacts and resources identified during the ISP will be leveraged during the RSP.

The services for the ISP went live on June 22nd, 2020. The launching of the public service announcements reached across the state of Arizona. The Crisis Response Network already is the Crisis Provider for the Northern and Central Regions of Arizona. CRN has a long history of providing crisis services. CRN partnered with 6 Providers who also have a long standing history of providing services to include counseling services, assessment and referral services, linkages to resources and providing Peer and Family services/supports.

CRN and the 6 Subcontractors/Providers have linkages and contacts across the state of Arizona and CRN choose to contract with providers from multiple Arizona Counties to have a statewide reach across all of the counties

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Arizona has experienced an increase in COVID-19+ Cases and COVID-19 deaths. The public is experiencing stressors during these unprecedented times and more individuals are in need of someone to talk. CRN/Providers are the link to contacts and resources for the individuals in need and their staff are skilled in resource linkages.

11. Please provide a brief summary that provides key information on the scope and magnitude of the disaster, how the non-Federal entity and providers propose to provide services during the RSP, and the nature and location of the proposed services. Please include a description of the length of time services will be required and describe how long-term cases will be handled. Please describe the nature of psychological and social problems observed and the types of mental health problems encountered by disaster survivors.

The scope and magnitude of the disaster is far reaching and extends across the Nation and the State of Arizona. Arizona is currently experiencing an increase in COVID-19+ cases and has seen an increase in deaths from COVID-19.

The Arizona Department of Health Services Dashboard for demographics indicates that COVID-19 Cases by age and ethnicity are: (statistics as of 6.29.2020)

- **65 and over: 9108 cases**
- **Native American: 8 % of cases are Native American persons**

The ADHS Dashboard for deaths indicates that the COVID-19 deaths in Arizona are: (statistics as of 6.29.2020)

- **65 and over: 1181 of 1588 deaths**
- **Native American: 18% of deaths are Native American persons**

The demographic is also changing and there is an increase in COVID-19 cases in the 20-44 and 45-54 age group.

This supports the need for the continuation of CCP services to provide services to Arizona Citizens and subgroups for a duration of time far beyond when the COVID-19 emergency is declared to cease. The Nation and the State are still in a state of emergency and there is no timeframe of when the emergency will cease. According to a report from the American Psychological Association published by Alia E. Dastagir-USA TODAY and, in the Arizona Republic dated 6.21.2020, 80% of Americans view the future as a significant source of stress. The article states that for many people, the negative mental health impacts will outlast the current crisis. The Nation and States must prepare for long term mental health consequences of the COVID-19 emergency well beyond the disaster.

Additionally, as of June 15th, 2020, Arizona counts of deaths by suicide were over 1,400 in 2019 and thus far have reached approximately 570 in 2020. Further segmentation by month suggests rates and counts are overall slightly lower in 2020 as compared to 2019 except for Pima County. Pima County saw a concerning increase in suicide in March 2020 and this included 15 suicides over the course of 14 days. Although surveillance observations are not homogeneous across counties, it is too early to determine how COVID-19 affects the state of suicide in Arizona. That being said, this crisis is still relevant and needs attention now and after COVID-19 subsides or the nation adapts to the presence of the new virus.


The CCP services are offered telephonically, virtually (telehealth) and depending on the assessment of the individual situation may be offered face to face following all physical distancing and CDC guidelines for safety and the wearing of masks. Arizona is currently under a mandate by the Governor for mandatory masking. The length of time for the services will be individually based upon need and the Behavioral Health Technicians will provide the services for as long as they are needed. If an individual needs longer term CCP services, referrals and resources will be coordinated.

There is “no wrong door” into services. Callers will be assessed and, if indicated, a “warm hand off” will be done by the 211 crisis line staff member and handed off to an intake team at the provider level. There are accommodations for after hours calls and for electronic referrals as well.

PART III: Geographic Areas and Needs Assessment

12. Estimated Population To Be Served:

x **OPTION A:** Applicants may opt to use their own method for determining the estimated population to be served. Please cite data sources used. Please also list the proposed providers and the number of direct and non-direct staff anticipated.

 **AHCCCS and CRN worked together to populate the table in Option B but found the method to not be a good fit for the CCP RSP Program in Arizona in response to COVID-19. The estimated population to be served using that method was determined to be unrealistic. Because service providers in Arizona may be statewide providers, or serve a single county, or multiple counties, we found there would be duplication in the estimated population to be served by some providers. Additionally, some FTEs serve multiple counties, so using each county's population data would also lead**

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to duplication in the population estimate, and thus, provide a number too large to be a proper estimate. Due to these limitations, we decided to calculate the population to be served based on an adjusted formula, using the number of counseling staff FTE and an adjusted ratio of individuals to be served per counselor.

The total number of unduplicated counselors providing services under the grant in Arizona is 34.25 FTE. In typical CCP programs, each counselor serves 300 individuals. Due to the nature of the COVID-19 pandemic (changes in outreach strategies, service accessibility, service delivery, etc.), we chose to estimate each counselor to reach approximately 200 individuals. With these estimates, the estimated population to be served is 6,850.

The proposed providers with their numbers of direct staff and non-direct staff are as follows:

- Crisis Preparation and Recovery (Maricopa County, Pinal County): 10 FTE direct, 0 indirect
- EMPACT (Maricopa County): 6.25 FTE direct, 0 indirect
- LaFrontera (La Paz County, Yuma County, Pima County, Santa Cruz County, Cochise County, Graham County, Greenlee County): 5 FTE direct, 0 indirect
- The Guidance Center (Mohave County, Yavapai County, Coconino County, Navajo County, Apache County): 5 FTE direct, 0 indirect
- The Family Involvement Center (Statewide): 3 FTE direct, 1 FTE indirect
- RI, International (Statewide): 5 FTE direct, 0 indirect
- Crisis Response Network (Statewide): 0 FTE direct, 10.1 indirect

OPTION B: Use the following table to estimate the impacted population for each requested service area (county, parish, tribal land, etc.). Populate the table using census data for the total population for each designated service area. Multiply the “percentage impact factor” by the “total census population” to arrive at an estimated population to be served during the RSP. Please select a “percentage impact factor” between ¾% (0.0075) and 2% (0.02) of your census population to target for services; provide a brief justification for the “percentage impact factor” you have chosen in the box below. Please also list the number of direct and non-direct staff anticipated.

Service Provider Name (if known) and Requested Declared Service Areas	Total Census Population in Requested Declared Service Areas	Percentage Impact Factor (0.0075 to 0.02)	Estimated Population to Be Served Within 9 Months	Number of Direct Staff FTEs (Crisis Counselors, Team Leads) (Typically 300:1 Ratio)	Number of Non-Direct Staff FTEs (Admin., Fiscal, Data, etc.) (Typically 15–20%)
TOTALS:	0.00		0.00	0.00	0.00

Please describe any special circumstances not captured in the above table that will have an impact on the need for crisis counseling services. Include any high-risk groups or populations of concern (e.g., children, adolescents, older adults, ethnic and cultural groups, people with disabilities and other access and functional needs, lower-income populations, first responders). Please include your plan to reach these populations

Older adults over the age of 65 continue to experience an increase in COVID-19+ Cases and COVID-19 deaths. Per the ADHS Dashboard 1118 persons have died from COVID-19 who are over the age of 65 and 18% of deaths in Arizona are

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Native Americans.

AHCCCS and its Contractor CRN plan to reach these populations by launching public service announcements that are culturally sensitive to these high risk groups. AHCCCS reached out to our Tribal Partners to review web ads and banners and got feedback about the web ads and they are included in the CRN website to educate the public on the CCP services.

CRN created a Resilient Arizona Crisis Counseling Program website with a multitude of web ads/banners to outreach to Arizonans across the state and to high risk sub-groups. The Child Specialist and the Adult Specialist will be outreaching to coalitions, setting up focus groups and holding town halls to educate the public on CCP services.

In addition, the AHCCCS Public Information Officer had been involved and assisted in putting information on the AHCCCS website and worked with ADHS to publish information on the ADHS website about the CCP services and how to access services. These efforts will continue to ensure outreach to all Arizonans and the high risk subgroups. CRN will also be outreaching to coalitions and may hold focus groups and town halls to outreach and educate the public.

PART IV: Resources and Capabilities

13. Describe the current mental health resources and explain why they cannot meet the disaster-related mental health needs caused or aggravated by this disaster.

Arizona has seen an increase in suicide in Pima County and an increase in calls to the 211 COVID Hotline for depression, anxiety and suicidal thoughts. Current providers are stretched with current resources. The RSP funds will allow for continued funding to provide dollars for CCP and allow the state to continue with public education and messages about how to access services.

The COVID-19 Emergency is still declared a federal disaster and there does not appear to be an end date. The citizens of Arizona are suffering and we must be diligent in providing CCP services to address their fears, anxiety and feelings of depression. In addition, many Arizonans are experiencing job loss, economic losses and financial stressors that affect their social determinants of health; food, housing/shelter, access to utilities and health care.

14. Has the non-Federal entity received funds for mental health disaster response from any other source (e.g., U.S. Department of Education, foundations)? If so, how much and how are these funds used?

No; not at this time

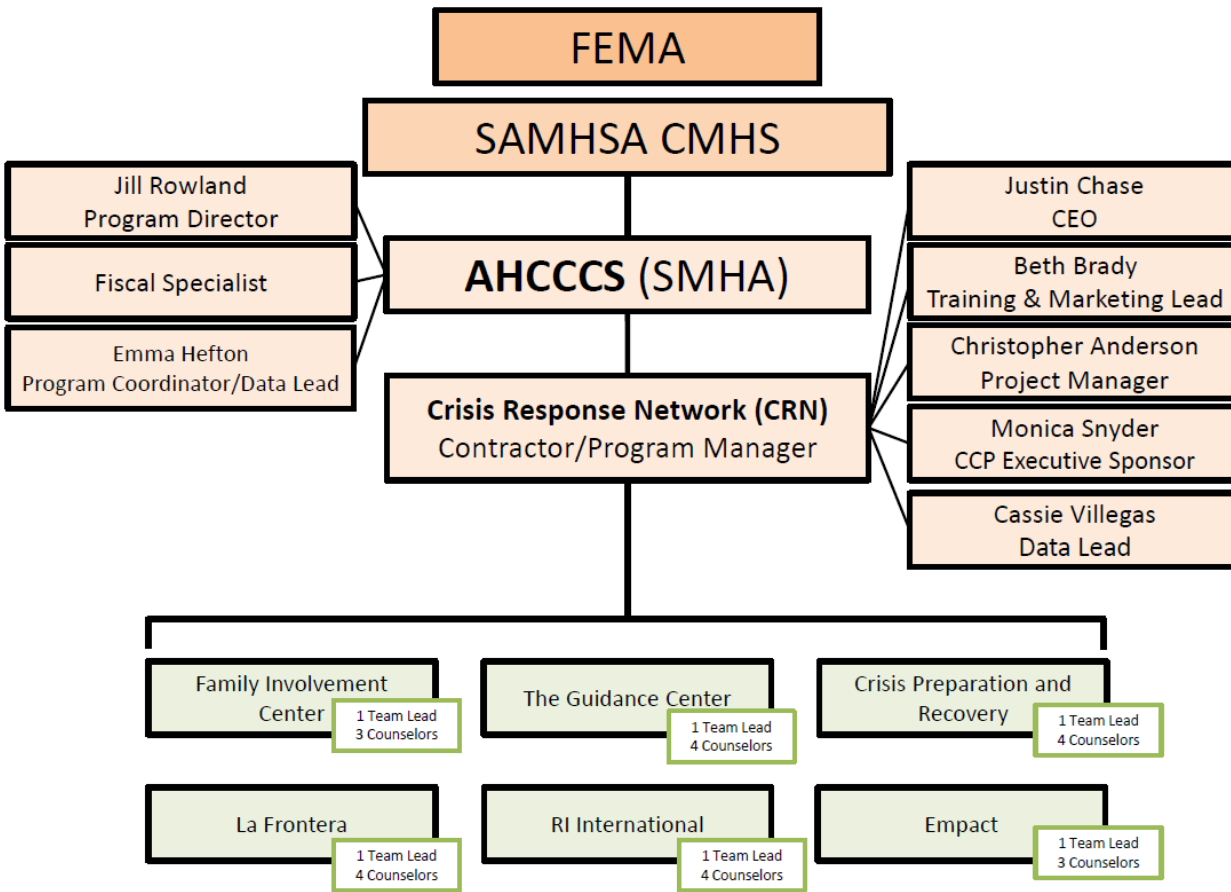
PART V: Program Administration

15. Will the State, Indian Tribal Government, or Territory be providing any direct crisis counseling services?

Yes No

16. Insert or attach an overall organizational chart for this project.

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17. Provide a brief description of administrative oversight plans (supervision and monitoring of crisis counselors, team leads, data collection efforts, managing and monitoring staff stress, etc.).

AHCCCS has identified a Program Director and Program Coordinator at the state level who are providing administrative oversight of the Crisis Response Network for deliverables, reporting, data collection and is ensuring the Contractor/CRN has a training plan. The Program Coordinator at AHCCCS and the Data Lead at CRN will be checking data regularly for quality. AHCCCS will also institute regular check in calls with CRN to review data.

AHCCCS has developed a Training Excel Spreadsheet to monitor ISP required trainings to include:

- **Names of Staff Trained**
- **Date of Training**
- **Name of Training**
 - **CCP Core Training**
 - **Data Collection Training**
 - **Supplemental Trainings as assigned**
 -

The Training Excel Spreadsheet will continue to be used to monitor the required trainings for the RSP as well.

CRN and the Providers will supervise and monitor the Team Leads and the Crisis Counselors. They will employ Behavioral Health Professionals and Behavioral Health Technicians who will answer the 211 CCP line. CRN is also implementing a two layer approach to monitoring the services and Providers. CRN implemented a Quality Team and a Data Team. The Quality Team will review the clinical documentation for clinical quality and the Data Team will review the data for data metrics; this two layered approach will audit for both quality and data entry.

18. How will the non-Federal entity monitor the organization and deployment of crisis counseling teams? If more than one provider agency will be delivering services, please describe the plan to coordinate services. If more than one provider will cover a service area, please attach or include a map that shows how the responsibility for that service area will be divided.

CRN has contracted with 6 Subcontractors/Providers. Each Provider employs Team Leads and Crisis Counselors/Teams.

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CRN is completing a “warm hand off” when a call is received to the appropriate service Provider depending on geography/services area and specialty. In addition to service coordination, CRN also provides indirect services statewide including outreach and marketing.

- **Crisis Preparation and Recovery will serve Maricopa County and Pinal County.**
- **EMPACT will also serve Maricopa County.**
- **LaFrontera will serve Southern Arizona, which is comprised of: La Paz County, Yuma County, Pima County, Santa Cruz County, Cochise County, Graham County, and Greenlee County.**
- **The Guidance Center will serve Northern Arizona, which is comprised of: Mohave County, Yavapai County, Coconino County, Navajo County, and Apache County.**
- **The Family Involvement Center will serve Arizona statewide, including Gila County which is not covered in the service areas listed above.**
- **RI, International will serve Arizona statewide, including Gila County which is not covered in the service areas listed above.**

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19. Describe the non-Federal entity's plan for quality control methods to ensure appropriate services reach survivors.

AHCCCS has published information about the Crisis Counseling Program on the AHCCCS website, the ADHS website and CRN created a website for the Resilient Arizona Crisis Counseling Program (resilientarizona.org). AHCCCS and CRN will reach out to stakeholders to ensure the appropriate services reach survivors. AHCCCS and CRN will continue to monitor the AHDS Dashboard and evaluate needs and the populations most impacted by the COVID-19 Emergency.

20. With what organizations and community stakeholders will you partner? Select all that apply:

- Community mental health and substance abuse centers
- Schools
- Faith-based organizations
- First responders
- Community-based cultural organizations
- Law enforcement
- Local elected officials
- Long-term recovery groups
- Other: Tribal partners

21. Briefly describe how you will engage with the partners identified above.

CRN is reaching out to community partners through coalitions, focus groups and town halls. CRN has partnerships across the state of Arizona and has subcontracted with Providers who cover multiple counties across the state.

22. What primary Crisis Counseling Assistance and Training Program (CCP) services will you provide? Please select all that apply.

- Individual crisis counseling
- Group crisis counseling
- Brief educational or supportive contact
- Public education
- Assessment, referral, and resource linkage
- Community networking and support

23. What secondary CCP services will you provide? Please select all that apply.

- Development and distribution of educational materials
- Media and public service announcements

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24. **State Staffing Plan.** Please provide information on the staffing at the State, Territory, or Tribe level. Include leadership positions and direct staff if the State, Territory, or Tribe is providing any direct services. Do not include provider-level staff.

Type of Staff	Grant Funded # of Staff Members	Grant Funded # of FTEs (based on 40 hours per week)	Projected In-Kind # of Staff Members	Projected In-Kind # of FTEs (based on 40 hours per week)
CCP State Program Manager/Director	1	.50	NA	NA
CCP Program Coordinator	1	.50	NA	NA
CCP Fiscal Specialist	1	.50	NA	NA
Totals:	3.00	1.50	0.00	0.00

25. Describe the non-Federal entity’s plan to ensure clear program identity (educational materials, wellness messaging, logos, etc.) and market the program (including website, hotline, social media, public service announcements, etc.).

CRN has created a Resilient Arizona Crisis Counseling Program web page with web ads and banners.
The webpage is resilientarizona.org
AHCCCS has put information on the AHCCCS website and the AHDS website: www.azahcccs.gov and www.adhs.gov

26. Briefly describe the facilities to be utilized and your plan for securing office space for this project.

Existing facilities and space will be utilized and there are no plans for securing new office space for this project

