STATE OF ARIZONA

Douglas A. Ducey
Governor

DEPARTMENT OF ECONOMIC SECURITY
Your Partner For A Stronger Arizona

Designated State Agency

Timothy Jeffries
Director

ARIZONA STATE PLAN FOR REFUGEE RESETTLEMENT

Submitted August 2015
Amended November 2015

Public comments concerning this plan should be addressed to:

Arizona Department of Economic Security
Division of Aging and Adult Services
Arizona Refugee Resettlement Program
P.O. Box 6123, Site Code 950A
Phoenix, Arizona  85005
I. ADMINISTRATION

A. Authority

The intent of the Refugee Act of 1980 and subsequent amendments is that refugees’ most urgent problems be addressed by the states through programs that will enable such refugees to become gainfully employed and self-reliant as rapidly as possible. The State of Arizona recognizes that refugees face many obstacles and challenges to reaching that goal. The Arizona State Plan for Refugee Resettlement (State Plan) sets forth coordinated assistance programs, services, and activities designed to provide for the successful resettlement of refugees in Arizona.

This document provides information on the types of coordinated assistance programs, services and activities to be developed and administered by the State, and the characteristics of individuals to be served under the provisions of Section 412 (a) (6) B of the Immigration and Naturalization Act and the Refugee Act of 1980, as amended.

Services will be directed toward the following federal goals:

- Promote economic self-sufficiency for refugees within the shortest possible time after entrance into the State through coordinated and effective use of support services, cash, and medical assistance.

- Contribute to effective resettlement of refugees within the shortest possible period of time after entrance into the State through coordinated and effective use of support services, cash, and medical assistance.

1. In compliance with 45 C.F.R. Part 400 § 400.5, the Department of Economic Security (DES) has been designated by the Governor as the single state agency responsible for the administration of this State Plan (Attachment G-1).

2. In compliance with 45 C.F.R. Part 400 § 400.5(d), DES has established the State Refugee Coordinator within the Department to oversee the Arizona Refugee Resettlement Program (RRP), who is designated with the responsibility and authority to ensure coordination of public and private resources in refugee resettlement in the State. The current State Refugee Coordinator is Charles Shipman.

3. The State of Arizona is a publicly administered program.

   a. The Assistant Director and the Deputy Assistant Director of the Division of Aging and Adult Services (DAAS), and other departmental administrations, provide policy input, technical assistance, and staff support to RRP to help ensure a coordinated statewide resettlement strategy.

   b. In Arizona, most refugee resettlement occurs in the Greater Phoenix and Tucson areas.
B. Organization

1. DES and RRP

DES provides Arizonans with employment and rehabilitation services, social services, financial, nutritional and medical assistance. RRP is assigned to the DAAS. In order to provide effective services to Arizona’s refugees, key staff members have been designated in other divisions within DES and have unified their authorities in a coordinated departmental effort to assist the State Refugee Coordinator.

In addition to the State Refugee Coordinator, key management, programmatic, and administrative staff are employed in RRP to assist in meeting statutory responsibilities for the overall management and operation of the State Refugee Program, such as coordination, planning, policy and program development, and implementation, monitoring, consultation, data collection, reporting, and travel. Professional staff hold statewide responsibility for RRP programs and are the contact persons and representatives for the local forums, Mutual Assistance Associations (MAAs)/Ethnic Community-based Organizations (ECBOs), and other key stakeholders. RRP may receive administrative support from other staff of the Administration, the Division, and other DES personnel to carry out ORR-funded project-specific tasks. In compliance with Federal Regulations and State Letter 12-08, these costs will be charged to the Refugee Cash and Medical Assistance Grant (RCMA) and discretionary grants as available, and may be charged to other grant sources should RCMA become unavailable.

C. Assurances

1. The State will comply with the provisions of Title IV of the Immigration and Naturalization Act, official issuances of the Director of the United States (U.S.) Department of Health and Human Services (HHS), Office of Refugee Resettlement (ORR), and all other applicable federal statutes and regulations in effect during the time that it is receiving federal funding.

2. The State assures that it will meet all the requirements in Part 400 (§400.5 (i) (2)).

3. The State will comply with Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, Title IX of the Education Amendments of 1972, the Age Discrimination Act of 1975, all rules and regulations applicable to these laws prohibiting the discrimination of handicapped persons in federally assisted health and human service programs, 45 C.F.R. Part 400 § 400.28 Maintenance of Records and Reports and 45 C.F.R. Part 400 § 400.120 Reporting Requirements. This assurance is given in consideration of and for the purpose of obtaining any and all federal grants or other federal financial assistance.
4. The State will amend the State Plan as needed to comply with standards, goals, and priorities established by the ORR Director.

5. The State assures, as specified under 45 C.F.R. Part 400 § 400.5 (g), that assistance and services funded under the State Plan will be provided to refugees without regard to race, religion, nationality, sex, or political opinion.

6. The State assures, as specified under 45 C.F.R. Part 400 § 400.5 (h), that, unless exempted from this requirement by the Director, it will convene meetings not less often than quarterly with representatives of: 1) local resettlement agencies (RAs), 2) local community service agencies, and other agencies that serve refugees, and 3) state and local governments, to plan and coordinate the appropriate placement of refugees in advance of their arrival.

7. Pursuant to 45 C.F.R. Part 400 § 400.54 (b) (2), when a RCA client fails to comply with work program requirements, the State will ensure that due process standards are met as described by constitutional law as related to Temporary Assistance for Needy Families (TANF) regulations. Sanction implies loss of RCA only.

8. The State of Arizona shall provide applicants for, and recipients of, assistance and services with an opportunity for a hearing to contest adverse determinations, using hearing procedures set forth in 45 C.F.R. Part 400 § 400.83.

9. Emergency Response and Recovery Plan. Each state agency has responsibility to develop and maintain a Business Continuity Plan that is part of the overall State Plan. Specific programs within state agencies develop and maintain plans for assistance to vulnerable populations.

DES has a comprehensive Business Continuity Plan that was adopted in October 2005. The Plan is updated regularly to include new guidance developed by the Business Continuity Planning Group. The DES Business Continuity Plan includes reference to specific plans at the program level.

The Arizona Department of Health Services (ADHS) has the lead responsibility for the portion of the State Emergency Response and Recovery Plan that includes plans for pandemic influenza/H1N1 pandemic (Attachment G-3).
II. ASSISTANCE AND SERVICES

A. Cash and Medical Assistance (CMA)

CMA is proportioned to refugees who are not eligible for other public cash assistance programs (such as TANF and Supplemental Security Income (SSI)). CMA is coordinated with support services in a way that promotes employment: namely, refugees must enroll in employment services and comply with work search requirements in order to receive cash assistance.

B. Refugee Work Compliance

Recipients must comply with refugee-specific employment assistance, English language training (ELT), and employability assistance programs. Refugee work compliance is verified by all parties involved; i.e., designated Family Assistance Administration (FAA) field offices, RAs, and clients. FAA intake workers coordinate with refugee RA staff to ensure that Refugee Cash Assistance (RCA) recipients receive other refugee-specific services, such as self-sufficiency planning and case management services.

RCA applicants are required to register for employment services with their respective RA, and receipt of RCA may be suspended if clients do not comply with the requirements of those services.

For refugees living outside of Maricopa and Pima Counties, FAA identifies DES branches in the appropriate cities and educates that staff about refugee service provision, and RAs work to coordinate employment and social services. Refugees residing outside of Maricopa and Pima Counties may be generalized as U.S. Tie cases and may require less support.

C. Refugee Cash Assistance (RCA) 45 CFR Part §400.45

Arizona administers a public RCA program to provide improved benefit and coordination of services for refugees, including mainstream TANF related programs, Supplemental Nutrition Assistance Program (SNAP), Title XIX, Refugee Medical Assistance, and refugee-specific employment assistance and case management.

a. One-stop RCA/mainstream assistance is provided at two designated field offices, one each in Phoenix and Tucson, staffed by assigned personnel of FAA to determine the eligibility of refugees for TANF, RCA, and SNAP assistance. This delivery system promotes expedited interaction between the RCA eligibility determination worker and the RAs personnel assisting new arrivals, and facilitates more ready resolution of problems, clarification of miscommunication, and exchange of program information. At that time FAA staff will determine eligibility.

b. Financial assistance is based on the State’s needs and payment standards, with income and resources taken into consideration on the same basis as in the TANF Program, except where otherwise provided by 45 C.F.R. Part 400 § 400.66. Income is budgeted prospectively based on the best estimate of the amount of available countable income to
be received in the benefit month. Income is available when it is received or when it is reasonably anticipated. Income received more often than monthly is converted into a monthly amount.

1. TANF payments are made in accordance with the State’s TANF benefits levels (Attachment G-2). The A1 Payment standard is used when the participant has an obligation to pay allowable shelter costs such as rent, mortgage, taxes, etc. The A2 Payment Standard is used when the participant does not have such obligations.

2. RCA payments are also made in accordance with the State’s TANF benefits levels (Attachment G-2). The A1 Payment standard is used when the participant has an obligation to pay allowable shelter costs such as rent, mortgage, taxes, etc. The A2 Payment Standard is used when the participant does not have such obligations.

c. The State does not provide for a proration of shelter, utilities, and similar needs.

d. Pursuant to 45 C.F.R. Part 400 § 400.66 (a) 4, the State will provide any individual wishing to do so the opportunity to apply for RCA and will determine the eligibility of each applicant.

e. Pursuant to 45 C.F.R. Part 400 § 400.66, in determining income eligibility, the State will not consider resources remaining in the applicant’s country of origin unless the applicant receives funding that helps support the applicant with life in the U.S., or a sponsor’s income and resources, or any cash grant received by a refugee under the U.S. Department of State or U.S. Department of Justice Reception and Placement programs.

f. The State will not consider a sponsor’s income and resources as accessible to the refugee solely because the person is serving as a sponsor.

g. The State will not consider any cash grant received by a refugee under the U.S. Department of State or U.S. Department of Justice Reception and Placement Programs.

h. The State will determine eligibility under the TANF Program for refugees who apply for cash assistance (CA). The eligibility determination will revert back to the date of application.

i. The State will coordinate with the applicant’s sponsor or resettlement agency to complete the applicant’s application process for RCA.

j. The State coordinates with the applicant’s sponsor or resettlement agency to determine whether the applicant has voluntarily quit employment or refused to accept employment within 30 days of date of application for RCA.

k. The State is not a Public Private Partnership Program. As such, the State’s prescribed assistance and budget levels are lower than Public Private Partnership Programs.
1. The State is not a Public Private Partnership Program and does not provide any type of differentials or incentive payments.

m. In compliance with the general requirements of 45 C.F.R. Part 400 § 400.75, applicants are subject to all work participation requirements for RCA, unless they are exempt for one of the following reasons:

   ▪ Incapacitated, when determined by a physician or licensed or certified psychologist and verified by a caseworker, that a physical or mental impairment, by itself or in conjunction with age, prevents the individual from engaging in employability activities. A health or mental health practitioner, stating that the refugee is unable to participate and giving a timeframe for duration of the exemption or review of the exemption, shall complete the verification.

   ▪ A pregnant woman in the last three months of her pregnancy is exempt from job search. She is exempt from all employability activities for twelve (12) consecutive weeks following the birth of her baby. Medical verification of the last trimester of the pregnancy is required.

   ▪ A parent with a child or children over twelve (12) weeks old when there is no childcare available. Documentation stating that the family is unable to access the Arizona Child Care Assistance Program or other childcare programs shall be reflected in the case file. This exemption applies only to one adult per household.

   ▪ Caretaker of a totally dependent person due to medical or mental health issues is exempt from employability activities if a medical or mental health provider has indicated that this person needs full-time care. This exemption applies to only one adult per household.

   ▪ Working at least thirty (30) hours a week in unsubsidized employment expected to last at least 30 days. This exemption continues to apply if there is a temporary break in full-time employment expected to last no longer than ten workdays.

   ▪ Under age sixteen (16); or under age eighteen (18) but a full time student (as defined in the TANF program).

   ▪ Age sixty-five (65) or older.

   ▪ A victim of domestic violence where working or participation in employability activities will put them at greater risk of harm.

n. In compliance with Title VI of the Civil Rights Act of 1964, and under the guidance of ORR State Letter #00-18, dated September 19, 2000, the State of Arizona ensures that Limited English Proficient (LEP) refugees are provided meaningful language access, are given adequate information, are able to understand the services and benefits available to them, and are able to communicate their circumstances to RRP providers. RRP has
pursued the goal of ensuring that FAA policy material and all notices required in Sec. 400.55 are available in written form in English and in appropriate refugee languages. With regard to language groups that constitute a relatively small number of refugee speakers, commonly referred to as languages of lesser or limited diffusion, alternative methods of communication (such as oral interpretation in a refugee’s primary language) have been instituted.

2. RCA Program Administration

a. One-stop RCA/mainstream assistance is provided at two designated field offices, one each in Maricopa and Pima Counties, staffed by assigned personnel of FAA to determine the eligibility of refugees for TANF, RCA, and SNAP assistance. FAA coordinates with DES branches outside of Maricopa and Pima Counties to provide services to refugees residing in other counties.

b. One-stop RCA/mainstream assistance is provided at two designated field offices, one each in Phoenix and Tucson, staffed by assigned personnel of the Family Assistance Administration (FAA) to distribute TANF, RCA, and SNAP to eligible refugees.

c. FAA staff allocate their time between TANF and RCA clients in keeping with respective caseload levels.

d. The caseload ratio for RCA equates to an estimated two full-time equivalents (FTE) statewide.

e. The State charges an indirect cost rate of 11.63 percent against RCMA, for which HHS is the cognizant agency.

D. Refugee Medical Assistance (RMA) 45 CFR Part §400.90

1. Determination of Eligibility for Medicaid

Pursuant to 45 C.F.R. Part 400 § 400.5 (f), RRP administers RMA. Under the direction of the State Refugee Coordinator, staff are responsible for the operation of the program that aids the coordination of benefits per 45 C.F.R. Part 400 § 400.100.

a. With the implementation of the Affordable Care Act (ACA), all newly arrived refugees are able to apply for and receive medical benefits through Arizona’s Medicaid, the Arizona Health Care Cost Containment System (AHCCCS).

b. A refugee, asylee, or other eligible beneficiary determined ineligible for AHCCCS or State Children’s Health Insurance Program (SCHIP) may apply for RMA directly with RRP. Special Immigrant Juvenile Status (SIJS) youth receive medical coverage through the RMA system; however, such costs are tracked, charged and reported to ORR as Unaccompanied Refugee Minor (URM) costs. Resettlement agencies and the
Unaccompanied Refugee Minors Program (URMP) assist refugees and other eligible beneficiaries with the RMA application process. See attached flow chart.

2. Financial Eligibility Standards

Currently, the State uses a higher financial eligibility standard of up to 200 percent of the national poverty level for determination of RMA eligibility. RRP is in the process of adopting the Modified Adjusted Gross Income Standards to be used for determining RMA eligibility, consistent with AHCCCS.

a. The State may opt to use section 1931 methodologies currently in place for eligibility standards.

b. In compliance with 45 C.F.R. Part 400 § 400.102, cash assistance payments will not be considered in determining eligibility for RMA. This applies to cash assistance payments made under the publicly administered RCA program, the U.S. Department of State’s Refugee Admissions Reception and Placement Program, and the Voluntary Agency Matching Grant Program. The State will not consider in-kind services and shelter provided to an applicant by a sponsor or resettlement agency in determining eligibility for and receipt of RMA.

3. Continued Coverage of Recipients who Receive Increased Earnings From Employment

a. Pursuant to 45 C.F.R. Part 400 § 400.104, refugees residing in the U.S. less than eight months who lose their eligibility for AHCCCS because of earnings from employment will be transferred to RMA without any eligibility determination.

4. Mandatory Services

a. RMA services are provided at least to the same extent and in the same manner as Medicaid per § 400.105. Towards this end, the State will ensure that due process standards are met as described by constitutional law.

5. Additional Services

a. The State provides Medical Screening services which are explained under Medical Screening Program § 400.107.

6. The State has an Intergovernmental Agreement (IGA) with the Maricopa County Department of Public Health (MCDPH) and a direct contract with Banner University Medical Center (BUMC). Under the agreement and contract, these agencies provide a comprehensive health-screening process that identifies and leads to the treatment of diseases that could affect the general public health and/or personal well-being and successful resettlement of refugees pursuant to (§400.5 [f]).
a. The Refugee Health Coordinator has access to the Center for Disease Control and Prevention’s (CDC) Electronic Database Notification information which is used for pertinent information upon refugees’ health status. Domestic refugee medical screening clinics also have access to this data, to which they refer prior to the medical screening in order to avoid duplication of services.

b. It is the State’s intent to continue to fund refugee health screening services with RMA pursuant to 45 C.F.R. Part 400.107, under an IGA with MCDPH and under direct contract with BUMC. Medical Screenings in Arizona are completed within 30-60 days of refugees’ arrival or eligible beneficiaries’ grant date of qualifying status, and will be completed in accordance with the CDC “Guidelines for the U.S. Domestic Medical Examination for Newly Arriving Refugees.” County health departments are regularly sent lists of refugees arriving with medical conditions requiring observation or treatment that also indicate the agency by which they are being resettled. In addition to the existing health screening services described above, the State intends to use RMA to cover CDC required vaccinations for adults ages 18 years and older.

c. Under an IGA with MCDPH and under direct contract with BUMC, these agencies provide a comprehensive health-screening process that identifies and leads to the treatment of diseases that could affect the general public health and/or personal well-being and successful resettlement of refugees. In Pima County at BUMC, medical screenings are conducted by a nurse practitioner. In Maricopa County at MCDPH, medical screenings are conducted by a physician together with a registered nurse.

d. Refugees are eligible for the following existing health screening services covered under Medicaid and/or state/local public health programs:

- Immunizations for children ages 18 years and younger under the State’s Vaccines for Children Program.

- Evaluation and treatment as necessary for suspected active or latent tuberculosis for all refugees under County Departments of Public Health Tuberculosis Control Programs.

- Evaluation and treatment, as necessary, for suspected sexually transmitted disease (STD) for all refugees under the County Departments of Public Health STD Programs.
7. Refugee Medical Assistance (RMA) Costs

a. Direct costs

<table>
<thead>
<tr>
<th>RMA Recipient Costs</th>
<th>Estimated Average Monthly Unit Cost</th>
<th>Estimated Average Monthly Recipients/Users</th>
<th>Estimated Total Fiscal Year Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>401.00</td>
<td>9</td>
<td>43,308.00</td>
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<tr>
<td>Non-medical direct costs (interpretation)</td>
<td></td>
<td></td>
<td>5,000.00</td>
</tr>
</tbody>
</table>

b. Administrative costs

<table>
<thead>
<tr>
<th>RMA Administration</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Provision of RMA Personnel Services/Employee Related Expenses</strong></td>
</tr>
<tr>
<td><strong>Personnel and ERE: 1.35 FTE</strong></td>
</tr>
<tr>
<td>State Refugee Coordinator</td>
</tr>
<tr>
<td>Social Services Administrator II</td>
</tr>
<tr>
<td>Phoenix-based Program and Project Specialist II</td>
</tr>
<tr>
<td>Claims Specialist</td>
</tr>
<tr>
<td>Intake, enrollment, claims processing, payments, reports, records maintenance/retention, orientations, coordination/technical assistance for public and private health provider, and liaise with state Medicaid system.</td>
</tr>
<tr>
<td><strong>Database Maintenance</strong></td>
</tr>
<tr>
<td>26,702</td>
</tr>
<tr>
<td><strong>Other Operational:</strong></td>
</tr>
<tr>
<td>ID production and maintenance, QNXT, technology services, systems and programming, technical assistance/training, coordination and planning, travel, and foreign language services.</td>
</tr>
<tr>
<td><strong>Medical/Dental Consultants</strong></td>
</tr>
<tr>
<td>11,000</td>
</tr>
<tr>
<td><strong>Total RMA Administration</strong></td>
</tr>
</tbody>
</table>
E. Refugee Medical Screening Program (RMS) 45 CFR Part §400.107

1. Written Approval for Medical Screen Program.

   a. Pursuant to ORR State Letter #12-13 the Director has given approval for using RMA for allowable medical screening services in accordance with 45 C.F.R. § 400.107.

2. The State assures that the RMS is in accordance with the requirements prescribed by the Director pursuant to § 400.107 (a) (1).

   a. Laboratory costs for screening services are not billed or paid by Medicaid as the screening providers either do not have a contract with AHCCCS or do not have a system for retroactive billing to AHCCCS to pay for these services. The State continues to encourage these providers to develop the capacity to bill AHCCCS for these costs.

   b. Basic RMS, immunization, and lab costs for 40 percent of adults not yet determined eligible for AHCCCS at time of service are approximately $760 per capita. All children’s vaccines are covered by the Vaccines for Children Program and are, therefore, not charged to RMA.

   c. The State assures that medical screening costs are reasonable as they are based on the Medicaid fee schedule.

   d. The State assures that screenings will be done in the first 90 days by monitoring both screening providers’ monthly reports.

3. Medical Screening Costs

   a. RMS costs are reimbursed to MCDPH and BUMC on a per capita basis of approximately $525 per basic preventive health screening vaccinations and lab tests. Preventive health lab tests and lab test diagnostics are charged an approximate rate of $323 per capita. Basic adult screening costs are charged at approximately $146 per capita. Adult immunization costs are charged at a per capita rate of $245. The non-medical direct cost of interpretation comes to $5,000 yearly.

<table>
<thead>
<tr>
<th></th>
<th>Estimated Average Monthly Unit Cost</th>
<th>Estimated Average Monthly Recipients/Users</th>
<th>Estimated Total Fiscal Year Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Screening</td>
<td>525.00</td>
<td>378</td>
<td>2,381,400.00</td>
</tr>
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</table>
b. Medical Screening administration costs are as follows:

<table>
<thead>
<tr>
<th>Medical Screening Administration</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Personnel and ERE: 1.35 FTE</strong></td>
<td></td>
</tr>
<tr>
<td>State Refugee Coordinator</td>
<td></td>
</tr>
<tr>
<td>Social Services Administrator II</td>
<td></td>
</tr>
<tr>
<td>Phoenix-based Program and Project Specialist</td>
<td>102,771</td>
</tr>
<tr>
<td>Claims Specialist</td>
<td></td>
</tr>
<tr>
<td><strong>Medical Screenings Coordination – MCDPH and BUMC</strong></td>
<td>304,116</td>
</tr>
<tr>
<td><strong>Database Maintenance</strong></td>
<td>80,104</td>
</tr>
<tr>
<td><strong>Other Operational:</strong></td>
<td></td>
</tr>
<tr>
<td>ID production, travel, OnBase system</td>
<td>52,305</td>
</tr>
<tr>
<td><strong>Total Medical Screening Administration</strong></td>
<td>$539,296</td>
</tr>
</tbody>
</table>

F. Refugee Social Services (RSS) 45 CRF Part §400.140

1. Allowable employability services reflect the broad array defined in 45 C.F.R. Part 400 § 400.154, with particular emphasis on the following:

   Employment services, including development of a Family Self-Sufficiency Plan and an individual employability plan, world of work and job orientation, job clubs, job workshops, job development, referral to job opportunities, job search and job placement, and follow up.

   Employability assessment services, as part of the service provision of employment service contractors who provide employment assessment services.

   On-the-job training, when such training is provided at the employment site and is expected to result in full-time, permanent, unsubsidized employment with the employer who is providing the training.

   Translation and interpreter services, when necessary in connection with employment or participation in an employability service.
The promotion of economic self-sufficiency for refugees within the shortest possible time after arrival in the U.S., as stated in Section A, Part I, Introduction, is an RRP priority and primary goal of employability services. RRP makes available refugee employment assistance through a network of contracted service providers with capacity to provide linguistically appropriate and culturally responsive employment services and case management. Providers assist clients with such efforts as completing applications, initiating employer contact, instructing in job-specific and employee requirements, and conducting necessary follow-up to support employment success, retention and beneficial employer-employee relations.

Clients are referred to RRP contracted employment/employability and case management services by the RAs, State TANF Program and contracted providers, FAA, MAAs, sponsors, other RRP service providers and other public and private community organizations. RRP service providers refer refugees to ELT and other social service programs.

English Language Instruction

The State emphasizes ELT with emphasis on obtaining and retaining employment. To advance accessibility by refugees, efforts are made to schedule classes at various levels and times in the day and evening. Group instruction is also provided at training or employment sites as appropriate. Job-related English instruction is correlated to daily work tasks and orientation that enables the clients to enter the job market and/or lead to greater job potential.

ELT providers coordinate class sites and related activities with RAs, MAAs/ECBOs, other service providers, and other state and local agencies. Providers ensure that an effective and adequate system of client follow-up exists.

Vocational Training

Refugees may be provided vocational training as described in 45 C.F.R. Part 400 § 400.154 (c) or vocational training as described in 45 C.F.R. Part 400 § 400.154 (e), as appropriate and resources permit, that is being carried out as part of an approved employability plan and is modified to reflect changed services or employment conditions.

Case Management Services

Refugees are provided case management services designed to familiarize them with conventional western systems and practices and to provide them with skills necessary for self-sufficiency and successful resettlement. These services facilitate the availability of information and access to human services and community resources.

Pursuant to 45 C.F.R. Part 400 § 400.155, case management also includes:

- Information and referral services;
- Outreach services including activities to familiarize refugees with available services, to explain the purpose of these services, and facilitate access to such services;

- Linguistically appropriate and culturally responsive services coordination and support, such as:
  - Emergency services to include assessment and short-term counseling to persons or families in a perceived crisis, referral to appropriate resources and the making of arrangements for necessary services; and
  - Health-related services to include information, referral to appropriate resources, assistance in scheduling appointments and obtaining services, referral to counseling if needed; and
  - Understand and identify their physical and mental health needs and maintain or improve their physical and mental health; and
  - Home management services to include formal or information instruction to individuals or families in management of household budgets, home maintenance, nutrition, housing standards, tenants’ right, and other consumer education services; and
  - Transportation when necessary for participation in a service other than an employability service; and
  - Translation and interpreter services when necessary for a purpose other than in connection with employment or participation in employability services.

2. The State assures that the services are consistent with §400.154 and § 400.155.

   a. The State provides assistance in obtaining Employment Authorization Documents (EADs), but not the actual fee to INS as part of the cost. The RAs have staff that are BIA accredited that assist clients in preparation for citizenship and naturalization. These services are provided at no cost to the State.

G. Cuban/Haitian Entrant Program (C/H) 45 CFR Part §401

1. The State will comply with all applicable provisions of 45 Code of Federal Regulations (C.F.R.) Part 400 and Part 401 governing the Refugee Resettlement Program and the Cuban and Haitian Entrant Program.

2. In compliance with 45 C.F.R. Part 401, all refugee-specific services shall be provided to Cuban and Haitian Entrants under the same conditions and to the same extent as are provided to refugees. For purposes of determining the eligibility of Cuban and Haitian
entrants, the same standards and criteria shall be applied as are applied in the
determination of eligibility for refugees.

**H. Unaccompanied Refugee Children (URM) 45 CFR Part §400.5 (e)**

1. Presence of Unaccompanied Refugee Minors Program (URMP)
   a. The State does receive funds to operate an URMP in Arizona.

2. Administrative Structure and State Oversight
   a. The URMP is administered in accordance with 45 C.F.R. Part § 400.5; §400.117; §
      400.120; ORR Statement [1] III Action Transmittal S.S.A.-AT-79-04 (OFA), 45
      C.F.R. Part 400 § 400.111 and subsequent policies and standards issued by ORR:
      1. RRP contracts for URM services with a licensed child welfare agency. RRP and
         the contracted URM service provider confer at least annually with provider
         agencies.
      2. The agency operates in compliance with all appropriate and applicable state and
         federal guidelines including the review and timely submission of required
         placement and outcome reports for URMs.
      3. RRP exercises oversight of the contracted licensed URM service provider through
         quarterly reporting of program activities and outcomes by the provider and
         frequent consultation on issues related to capacity, placement, and case
         management.
      4. Pursuant to 45 C.F.R. Part 400 § 400.120, the State regularly conducts on-site
         monitoring reviews, including client home visits, of the contracted licensed URM
         service provider for compliance with the Scope of Work, the contents of which
         are based on foster care and ORR standards for URM services. RRP conducts
         client case file reviews for compliance with ORR requirements related to URM
         progress toward successful emancipation. Monitoring outcomes are reported to
         ORR as required.
      5. The monitoring tools used by the State are consistent with DES contracts
         monitoring requirements.
   b. The State assures the following:
      1. The State assumes program accountability for all aspects of the program,
         including fiscal and program reporting.
      2. RRP contracts for services to unaccompanied refugee minors with a licensed child
         welfare agency.
3. RRP and the contracted URM service provider confer at least annually with provider agencies.

3. Legal Responsibility
   
a. 400.115(a) and ORR Statement, III. Program Standards, Legal Considerations:
   
   1. Within 30 days of arrival, a dependency petition is filed by the contracted licensed URM child welfare agency to establish legal responsibility.
   
   2. The contracted licensed URM child welfare agency, Catholic Charities takes legal responsibility of the URM through legal custody. This action follows the process normally required by State law.
   
   3. The court has oversight over a URM up until the age of 18, working within the parameters of the State’s child welfare system to ensure that the child’s best interest is served.
   
   4. Beginning at age 18, youth may elect to remain in the program up to age 21 through a voluntary agreement with the contracted URM service provider.

4. Eligibility Determination
   
a. The State serves all URM-eligible populations and DES provides the same range of child welfare services and benefits to unaccompanied refugee minors that are available to other foster care eligible minors in Arizona, including the State’s plans under Titles IV-B and IV-E of the Social Security Act.

b. Age Considerations:
   
   1. Youth up to age 21 are eligible to return to placement and services on a case by case basis as determined by the contracted URM service provider in consultation with RRP.

   2. Youth ‘age-out’ from voluntary placement at age 18.

c. Other eligibility considerations:
   
   1. Youth must adhere to program rules and terms of agreement established by the URM contracted service provider. Failure to abide by those rules and terms may result in termination of eligibility.

   2. Youth up to age 21 are eligible to return to placement and services on a case by case basis as determined by the contracted URM service provider in consultation with RRP.
d. URMs that were in foster care while age 16, 17, or 18, and are under age 21 are offered education and training vouchers (ETVs) for post-secondary education and training. Each student receiving ETVs at age 21 may continue to receive the vouchers up to age 23.

5. Services and Case Review/Planning

a. The State serves all URM-eligible populations and DES provides the same range of child welfare services and benefits to unaccompanied refugee minors that are available to other foster care eligible minors in Arizona, including the State’s plans under Titles IV-B and IV-E of the Social Security Act.

b. Case Review

1. URM cases are reviewed by URM service provider staff every six months (or when there is a change in the child’s status) for continuing appropriateness of placement and services, including options for adoption. Cases of youth up to age 18 are reviewed by the Foster Care Review Board and the State court. Case reviews monitor the continuing appropriateness of living arrangements and services.

2. Permanency plan reviews are conducted in accordance with the State’s Title IV-B plan and applicable State guidelines that address the full range of permanency options for URMs, including reunification with the parent(s), adoption with placement preference to a relative or current foster parent, permanent placement and legal guardianship with a fit and willing relative (kinship care), legal guardianship or custody with another adult, or another planned permanent living arrangement.

3. An unaccompanied minor continues to meet the definition of “unaccompanied minor” and is eligible for benefits and services under 45 C.F.R. Part 400 § 400.113 until the minor is reunited with a parent, a non-parental adult willing and able to care for the child to whom legal custody is granted under state law, or attains 18 years of age or such high age as the State’s Title IV-B plan prescribes for the availability of child welfare services to any other child in the State.

c. Case Plan Elements:

1. The worker assigned to the case develops and implements a Case Plan with the foster parents and the minor for the care and services appropriate to the needs of the child. Case Plan elements include at minimum, Family Reunification.

2. The worker assigned to the case develops and implements a Case Plan with the foster parents and the minor for the care and services appropriate to the needs of the child. Case Plan elements include at minimum Placement.
3. The worker assigned to the case develops and implements a Case Plan with the foster parents and the minor for the care and services appropriate to the needs of the child. Case Plan elements include at minimum, Health Screening and Treatment.

4. The worker assigned to the case develops and implements a Case Plan with the foster parents and the minor for the care and services appropriate to the needs of the child. Case Plan elements include at minimum, Mental Health Needs.

5. The worker assigned to the case develops and implements a Case Plan with the foster parents and the minor for the care and services appropriate to the needs of the child. Case Plan elements include at minimum, Social Adjustment needs.

6. The worker assigned to the case develops and implements a Case Plan with the foster parents and the minor for the care and services appropriate to the needs of the child. Case Plan elements include at minimum, Education/Training needs.

7. The worker assigned to the case develops and implements a Case Plan with the foster parents and the minor for the care and services appropriate to the needs of the child. Case Plan elements include at minimum, ELT needs.

8. The worker assigned to the case develops and implements a Case Plan with the foster parents and the minor for the care and services appropriate to the needs of the child. Case Plan elements include at minimum, Career Planning.

9. The worker assigned to the case develops and implements a Case Plan with the foster parents and the minor for the care and services appropriate to the needs of the child. Case Plan elements include at minimum, Preparation for Independent Living.

10. The worker assigned to the case develops and implements a Case Plan with the foster parents and the minor for the care and services appropriate to the needs of the child. Case Plan elements include at minimum, Preservation of Ethnic and Religious Heritage.

d. Placement Options and Health Coverage:

1. Available placement options include foster care, independent living, semi-independent living, therapeutic foster care, and placement options through the Division of Development Disabilities (DDD).

2. Health coverage is provided for URMs through the AHCCCS. Special Immigrant Juvenile Status (SIJS) youth receive medical coverage through the RMA system; however, such costs are tracked, charged, and reported to ORR as URM costs.
e. Youth who have emancipated from foster care placement services are eligible for and receive independent living services and educational training vouchers.

1. Each student receiving ETVs at age 21 may continue to receive the vouchers up to age 23.

f. The contracted URM service provider offers additional information on available benefits and services, as desired.

6. Interstate Movement

a. The contracted URM service provider works with the Interstate Compact on the Placement of Children (ICPC) to coordinate the placement of youth who transfer to another state URM program.
I. PANDEMIC INFLuenza PLANNING FOR ARIZONA

The State Plan for the possible arrival of pandemic influenza/H1N1 is part of the State Emergency Response and Recovery Plan. Each state agency has responsibility to develop and maintain a Business Continuity Plan that is part of the overall State Plan. Specific programs within state agencies develop and maintain plans for assistance to vulnerable populations.

DES has a comprehensive Business Continuity Plan that was adopted in October 2005. The Plan is updated regularly to include new guidance developed by the Business Continuity Planning Group. The DES Business Continuity Plan includes reference to specific plans at the program level.

The Arizona Department of Health Services (ADHS) has the lead responsibility for the portion of the State Emergency Response and Recovery Plan that includes plans for pandemic influenza/H1N1 pandemic.

II. REFUGEE RESETTLEMENT PROGRAM INVOLVEMENT IN STATE PANDEMIC INFLuenza PLANNING

RRP is represented on the DES Business Continuity Planning Group. The lead planners of the group also participate on the State Emergency Response and Recovery Planning Group.

RRP has provided the Business Continuity Planning Group with a demographic profile of its clients that includes countries of origin, languages spoken, medical insurance coverages, and cultural characteristics. The profile is updated annually and included in the Pandemic Influenza Plan.

III. INCLUDING REFUGEES AND REFUGEE SERVICE PROVIDERS IN PLANNING

RRP’s Pandemic Influenza Plan is reviewed and updated annually, with input from refugee service providers, Voluntary Resettlement Agencies (VOLAGs), and Mutual Assistance Associations (MAAs).

IV. ROLE OF REFUGEE HEALTH PROGRAM IN DESIGNING AND IMPLEMENTING PUBLIC HEALTH MEASURES

RRP health staff will assist with the development of educational programs and materials for refugees that includes personal hygiene in disease prevention, the use of masks and social distancing to reduce the spread of disease, accessing vaccines and anti-viral medications, and navigating the health care system.

Planning for the distribution of vaccines and anti-virals in Arizona is the responsibility of ADHS; priorities for prophylaxis and treatment are based on the Department of Health and Human Services Pandemic Influenza Plan and identify as high priority:
- Patients in hospitals;
- Health care workers with direct patient contact;
- Immunocompromised persons; and
- Pregnant women.

Priorities will be reconsidered in the event of a pandemic as information becomes available regarding availability of drugs, epidemiology, and probable social impacts.

V. INFORMATION DISSEMINATION DURING A PANDEMIC

During an influenza pandemic, it will be necessary to quickly provide information to refugees, refugee service providers, and MAAs/ECBOs. RRP will disseminate information as it becomes available. Materials will be translated as appropriate, time permitting prior to dissemination.

RRP obtains addresses of clients upon application for the Refugee Medical Assistance and many refugees move within a few months of arrival. RRP will work with RAs and refugee service providers to relay information to refugees. An emergency key staff contact roster for RAs and refugee service providers is available to RRP staff.

VI. CONTINUITY OF OPERATIONS PLAN (COOP)

The DES Business Continuity Plan includes guidance for continuing essential functions during an emergency. Plans are included for implementing an incident command structure, maintaining continuity of leadership within DES, personnel functions, electronic data and communication systems, and identifying alternative staffing.

RRP has submitted a plan for continuity of critical services during an emergency. The plan includes alternative contacts for all RRP key staff (Attachment G-3).

The DES Business Continuity Plan also includes a plan by the Division of Benefits and Medical Eligibility for providing clients, including refugees, with SNAP, cash benefits and eligibility determination for AHCCCS during an emergency.
DELEGATION OF AUTHORITY
FOR THE
ARIZONA REFUGEE RESETTLEMENT PROGRAM

BY THE POWER INVESTED IN ME, and in compliance with 45 CFR Part 400.5(a), I, Douglas A. Ducey, Governor of the State of Arizona, hereby designate the Arizona Department of Economic Security as the single State Agency responsible for the development of the State Plan of the Arizona Refugee Resettlement Program and for the administration of such State Plan for the said program.

The Director of the Arizona Department of Economic Security is hereby instructed to take the necessary steps to ensure the efficient and effective management of the Arizona Refugee Resettlement Program with fundings from the Federal government and other sources.

Also, in compliance with 45 CFR Part 400.5(d), the Director of the Arizona Department of Economic Security is empowered to assign the duties of the Arizona Refugee Resettlement Program State Coordinator to whomever the Director deems qualified within the Department.

2/14/2015

Date

Douglas A. Ducey
GOVERNOR

Attest:
Michele Reagan
Secretary of State
# Attachment G-2

**Income Maximum, Need and Payment Standards**
*(Effective March 2009)*

## A1 Need Standards

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<th>Need Standard</th>
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### A2 Need Standards

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These Payment Standards are 36 percent of the 1992 Federal Poverty Level adjusted for family size and a shelter cost factor.
I. Introduction

DES has a comprehensive Business Continuity Plan that identifies critical business functions, applications, risks, risk mitigation strategies and alternative solutions operational during an emergency.

RRP has submitted to DES documentation of critical functions and strategies for continuity of the critical functions for inclusion in the Business Continuity Plan.

II. Direction and Control Within RRP

The State Refugee Coordinator has overall authority for the operation of the unit. Contact information for the State Refugee Coordinator and key staff are as follows:

Charles Shipman  
State Refugee Coordinator  
602-542-6614 (O)  
cshipman@azdes.gov  
602-309-8670 (C)  
chshipman@aol.com

Asmeen Hamkar  
Refugee Health Services Manager  
602-542-6604 (O)  
ahamkar@azdes.gov  
602-653-6447 (C)  
N_Hamkar@cox.net

Mary Kingston  
Refugee Specialist  
602-542-6609 (O)  
mkingston@azdes.gov  
602-448-3321 (C)  
kingstons4@aol.com

III. Critical Functions

Certain critical functions are those processes that must continue with minimal interruption to ensure client safety and access to health care. Alternative methods for completing these processes are listed in order of preference:
A. Eligibility verification for health services will be determined by contacting the Refugee Health Social Services Administrator II primary or alternate contact number or email for refugees who are not in possession of their RMA identification card.

B. Processing of application information for new refugee arrivals will be performed by RAs faxing or scanning/emailing applications to RRP health staff or to the Refugee Health Social Services Administrator II by alternate email contact.

C. Authorization of non-routine medical services will be completed by provider fax of prior authorization request and supporting documentation to RRP health staff for review or through verbal approval by the Refugee Health Services Manager via phone.