

**Statement of Work
High Fidelity Wraparound
Care Management Entity
State of Wyoming**

PROGRAM NAME: Magellan Wyoming Care Management Entity

PROVIDER TYPE: Youth Support Partner
Wyoming High Fidelity Wraparound

SERVICE DESCRIPTION:

Wraparound is a family-driven, youth guided process that uses the family’s strengths as well as their supports to create a plan to meet the family’s needs and create hope. The High Fidelity Wraparound model aims to achieve positive outcomes by providing a structured, creative and individualized team planning process that, compared to traditional treatment planning, results in plans that are more effective and more relevant to the child and family. Additionally, wraparound plans are more holistic than traditional care plans in that they address the needs of the youth within the context of the broader family unit and are also designed to address a range of life areas. Through the team-supported planning and implementation process, wraparound also aims to increase the problem-solving skills, coping skills, self-efficacy and a social support network of young people and their family. The ultimate goal is to help youth develop and maintain positive connections within their communities, achieve in school, enjoy health and wellbeing, have friends and successfully live with families.

A Youth Support Partner is a young adult, ages 18 to 26 years old, with personal experience participating in the system of care (mental health, special education, child welfare, juvenile justice). They provide one-on-one support or support within groups for qualified youth in order to work on skill building.

SUMMARY OF PRINCIPLES

The values of wraparound, as expressed in its core principles, are fully consistent with the system of care framework. Our philosophy of care begins with an open, non-judgmental mindset and allows for the principle of “voice and choice”, which stipulates that the perspectives of the family – including the youth –must be given primary importance during all phases and activities of wraparound. The Youth Support Partner supports the youth to have a voice and provide youth-based choices. The values associated with wraparound further require that the planning process itself, as well as the services and supports provided, should be individualized, family driven, culturally competent and community based. The Youth Support Partner role includes adding the youth perspective to teams. Additionally, the wraparound process should increase the “natural and community support” available to a family by supporting the strengthening of interpersonal relationships and utilizing other resources that are available. Many times the Youth Support Partner can add to the team’s knowledge of healthy youth choices in a community. Finally, the

wraparound process should be “strengths based”, including activities that purposefully help the team, member and family to recognize, utilize, and build talents, assets and positive capacities.

All functions within the High Fidelity Wraparound model – The Family Care Coordinators, Family Support Partners, Youth Support Partners, Respite providers and supervisors are expected to adhere to the ten principles outlined and supported by the National Wraparound Initiative (<http://www.nwi.pdx.edu/>) and the Substance Abuse and Mental Health Services Administration (SAMHSA). Those principles are:

1. Family voice and choice
2. Team based (supported)
3. Natural supports
4. Collaboration
5. Community based
6. Culturally competent
7. Individualized
8. Strengths based
9. Unconditional
10. Outcome based

Specialized Wraparound Service Requirements include:

- Make initial contact with the youth and caregivers upon their addition to the team. The first possible day would be day eight, or the beginning of a family’s official enrollment into High Fidelity Wraparound.
- Support the addition of youth voice in the completion of the Strengths, Needs, Culture Discovery, CANS, ACE Survey, Crisis Team, Child and Family Team and Plan of Care (including a crisis plan) after the Youth Support Partner has been added to the team. This is done through conversations with youth and caretakers to gather information and shared by writing Contact Notes.
- Support and encourage youth voice – so the team talks about what the youth is interested in and people don’t talk as if the youth isn’t present.
- Youth Support Partners may be asked to help Family Support Partners facilitate groups of caretakers and youth, lead groups comprised of just youth and assist in providing Youth and Family Training for members on the C Waiver.
- When Youth Support Partners are on a team, they will be required to complete a WFI-EZ for each family at six months of enrollment.
- Youth Support Partners have a maximum ratio of 1:25.
- When the Youth Support Partner is assigned to a team, the Youth Support Partner is required to complete contact notes for any contact made with the team members.
- Input the Contact Notes into a management information system capable of tracking and monitoring functions and integrated with the Care Management Entity’s electronic health record, Fidelity EHR and any other tools identified by the Care Management Entity.
- Help the youth to explore new skills and interests.

- The Youth Support Partner may be assigned activities through the Plan of Care to support the family in developing skills and complete activities.
- Help the youth recognize, build and maintain healthy natural supports.
- Keep youth aware of what the Child and Family Team Meeting will be about and advocate for meeting times and duration that meet the member's needs.
- Check in with caregivers.

ENROLLED POPULATIONS TO BE SERVED BY WRAPAROUND

Individuals found eligible for the High Fidelity Wraparound program will be enrolled in the Care Management Entity. The following individuals will be eligible for Medicaid reimbursement under the Care Management Entity program:

- Children eligible for Medicaid; and
- Children eligible for Medicaid through the 1915(c) Waiver services

Children identified as meeting the criteria for the High Fidelity Wraparound as determined by the CASII, ECSII and Level of Care must be:

- Youth ages 6 to 20 years old must have a minimum CASII composite score of 20, and youth ages 4 and 5 years old must have an ECSII score of 18 to 30 OR the appropriate social and emotional assessment information provided to illustrate level of service needs; and
- Must have a DSM Axis 1 or ICD diagnosis that meets the State's diagnostic criteria.

And may include:

- Medicaid youth ages 4 to 21 at risk of out-of-home placement (defined and identified as youth with 200 days or more of behavioral health services within one State fiscal year).
- Medicaid youth ages 4 to 21 who currently meet Psychiatric Residential Treatment Facility level of care or are placed in a Psychiatric Residential Treatment Facility.
- Medicaid youth ages 4 to 21 who currently meet acute psychiatric stabilization hospital level of care; had an acute hospital stay for mental or behavioral health conditions in the last 365 days; or are currently placed in an acute hospital stay for mental or behavioral health conditions;
- Youth on the Children's Mental Health Waiver (1915(c)); and
- Medicaid youth ages 4 to 21 referred to the Care Management Entity (who meet defined eligibility, including clinical eligibility and SED criteria).

PERFORMANCE OUTCOMES

The Care Management Entity will monitor all provider/vendor performance on an ongoing basis and subject it to formal review according to a periodic schedule established by the Care Management Entity and the State, consistent with industry standards or State laws and regulations. The Care Management Entity will identify strengths and areas for improvement, and

the provider will be provided the identified strengths, asked for performance improvement if needed and/or corrective action or be terminated if substantial progress toward corrective action is not taken. All Youth Support Partners are required to provide to the Care Management Entity within defined timelines outlined in detail in Magellan's Provider Handbook at a minimum the following:

1. Submit contact notes in Fidelity EHR for each encounter with a team member. Documenting specific activities, skills and strategies that the Youth Support Partner contributes.
2. The Youth Support Partner, as designated in the Plan of Care, will prepare and debrief with the youth (member) regarding Team Meetings and record this in Contact Notes.
3. The Youth Support Partner, as designated in the Plan of Care, will support the youth during the Behavior Exploration helping the youth voice be heard. This will be clearly documented in Contact Notes. The Youth Support Partner will then support the youth by preparing and debriefing the Crisis Planning meeting and completing Contact Notes.
4. All Youth Support Partner activities must protect each enrollee's privacy in accordance with the privacy requirements at 45 CFR, parts 160 and 164, subparts A and E, to the extent that they are applicable.
5. The Youth Support Partner service unit amounts will be requested in the Plan of Care by the Family Care Coordinator and authorized by the Magellan Clinical team. Youth Support Partners are encouraged to communicate with Family Care Coordinator's the number of units needed for each activity they are assigned in the plan. The first possible day would be day eight at the completion of a complete application.
6. Youth who are out of home Psychiatric Residential Treatment Facilities or Residential Treatment will be limited in the amount of Youth Support Partner time available to them while in placement. This should be reflected in updated plan of care and return to community notices submitted by the active Family Care Coordinator.
7. The focus on purposeful transition is continual during the wraparound process, and the preparation for transition is apparent even during the initial engagement activities. The Youth Support Partner's role in purposeful transition is gradually taken by the natural supports or the youth and family themselves. This will lead to fewer and fewer units being needed. The Youth Support Partner will often transition off the team before the wraparound process is complete.

TRAINING REQUIREMENTS

Please refer to the Provider Certification Guide for specific training requirements for the Youth Support Partner. This can be found at www.magellanofwyoming.com.

NON-REIMBURSEABLE ACTIVITIES

The following activities by Wraparound Youth Support Partners are not reimbursable:

- Youth Support Partner activities that are not delivered to a member who is enrolled in High Fidelity Wraparound or the family of that member in support of the member's Plan of Care.
- The High Fidelity Wraparound provider must ensure that only specifically documented delivery of High Fidelity Wraparound services and supports are reimbursed by the Care

Management Entity. Activities that are the responsibility of another State agency and are excluded from Medicaid coverage (such as child welfare permanency planning or behavioral health services) are not to be billed as High Fidelity Wraparound.

- Transportation of the client is not a reimbursable component of High Fidelity Wraparound. The provider will coordinate with local Medicaid transportation supports and also help children and families connect with natural supports to provide needed transportation as part of the Team process.

STAFFING REQUIREMENTS

Provider qualifications required in order to contract with the Care Management Entity for the provision of High Fidelity Wraparound services are stipulated below.

Youth Support Partner: Requirements include the following:

- Youth Support Partners need to have a high school diploma or GED equivalent with behavioral health needs OR experience overcoming various systems and obstacles related to mental and behavioral health challenges
- 18-26 years of age.
- Possess a valid driver's license, appropriate auto insurance and reliable transportation.
- CPR and First Aid Certification.
- Completion of the required Care Management Entity and State training for provider/vendor.
- Completion of the required Care Management Entity and State training and credentialing processes.
- Enrolled as a Wyoming Medicaid Provider through the State's Fiscal Agent.
- Successful completion of all Central Registry and FBI/DCI background screenings.
- Demonstration of high fidelity to National Wraparound Initiative standards through ongoing participation in wraparound fidelity monitoring using the Wraparound Fidelity Assessment System.

FIDELITY MONITORING

To maintain a contracting relationship with the Care Management Entity, all providers must complete initial training and be either in the process of certification or certified. Re-certification is due annually. Documentation of annual staff re-certification will be provided to the Care Management Entity to demonstrate continued adherence to the fidelity standards. The Care Management Entity certification of a High Fidelity Wraparound provider will be withdrawn if current requirements, training and documentation are not maintained. Please refer to the Provider Handbook. The Magellan standards include requirements for cultural competency, and other National Wraparound Initiative standards that every High Fidelity Wraparound provider is expected to adhere to and demonstrate for quality and excellence.

WFI-EZ is a tool Magellan uses in monitoring High Fidelity Wraparound. Using the Wraparound Fidelity Assessment System tools (i.e. WFI-EZ) is essential in establishing and maintaining fidelity to the wraparound model. High Fidelity Wraparound providers are expected

to participate in completing the WFI-EZ and support caretakers and youth to complete one also. The Family Care Coordinator shall prompt the enrollee, their family, the Family Support Partner and the Youth Support Partner at least 30 calendar days before the WFI-EZ assessment date. Participation and review of fidelity monitoring and quality improvement activities to improve fidelity and meet additional minimum fidelity requirements established by the Care Management Entity is an essential part of improving wraparound for families.

REPORTING REQUIREMENTS

Youth Support Partners will provide up to date Contact Notes and adhere to quality documentation, and other reporting requirements at the request of Wyoming Magellan Care Management Entity.

DOCUMENTS BY REFERENCE

In addition to this contract and statement of work, all provider/vendors are required to adhere to the stipulations, regulations, performance guidelines and reporting as fully described in the following documents.

- 1915(c)HCBS Waiver
- 1915(b)Waiver: Wyoming Medicaid's Youth Initiative – A High Fidelity Wraparound Community-based Alternative for Youth with Serious Emotional/Behavioral Challenges
- Direct billing and Wyoming Rules