<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Billing Unit</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Service Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>5202 H2021</td>
<td>Hour</td>
<td>12.00</td>
<td></td>
<td>After School Programs Community-based wraparound services. These are before or after school programs that offer supervision and structure for youth. Programs must include social, recreational and educational activities. This service can only be provided for up to four hours per day, and can only be provided when school or summer school is in session. Services are to be provided in an agency setting.</td>
</tr>
<tr>
<td>5565B H0004</td>
<td>Quarter Hour</td>
<td>7.50</td>
<td></td>
<td>Anger Management Group Behavioral health counseling &amp; therapy, per 15 min. Anger Management Groups must follow a time-limited Wraparound / Children’s Court Services approved curriculum. The agency’s Anger Management curriculum is offered in a standardized session (60 to 90 minutes long) with of the training program typically ranging from six to twelve weeks. Per session length and program duration in number of sessions and session per week should be identified in the curriculum summary. Groups may consist of from 4 to 10 participants (with 2 facilitators required for groups of 8 participants or more). The goal of the Anger Management Group is to help youth with anger management issues and high levels of aggression learn to control their emotions, manner of response to others and more effective ways to communicate with others. Helping youth learn to understand and manage their feelings, allows youth to develop the skills needed to avoid escalation of negative feelings and serious confrontation(s) with other youth, parents, and authority figures.</td>
</tr>
</tbody>
</table>

**Credentials:**

A Day Care Certification or Day Care License is required if serving four to eight children under the age of seven or eight or more children to age 12. The program supervisor must be at least 21 years of age and have at least 1 year of experience working with children and have completed at least 24 hours of training. Training may include: early childhood training, child/human growth and development, early childhood education, first aid training, training in cardiopulmonary resuscitation, recognition of and reporting of childhood abuse and neglect, orientation to agency policies and procedures. Training may be documented via: attendance sheets, certificates of attendance or diplomas and is to be keep on file by the agency. Prior training in any of the above areas is acceptable with the appropriate supporting documentation.

Provider Agency employees providing after school programming must be: at least 18 years of age, have a valid driver's license and have at least one year of driving experience. Agency employees must complete 24 hours of training as described above within 6 months of employment. Prior training in any of the above areas is acceptable with the appropriate supporting documentation.

A program description is to be provided in the application process.
The Anger Management curriculum should be designed to teach youth strategies (e.g., problem-solving skills) that enable them to control their anger in the face of conflict. Although specific elements used in Anger Management training vary, most programs use a combination of techniques. Group rules need to be incorporated into the program and should be identified for participants during the first session. Curriculum activities may include: lectures, group discussions, role-playing, modeling of appropriate behaviors, simulation games, examples on videotape, pre and post tests.

The Anger Management curriculum must include components that are designed to address the following elements:
1) awareness of one’s own emotional and physical states when they are angry
2) the ability to understand the perspective of others
3) recognizing and using appropriate verbal and non-verbal communication skills
4) use of specific strategies that help the youth to moderate their responses to potential conflicts (e.g., Stop! Think! What should I do?, etc.)
5) understanding choices and consequences
6) training in problem-solving skills and coping strategies including:
   · identifying the problem
   · generating alternative solutions
   · considering the consequences of each solution
   · selecting an effective response to the situation
   · evaluating outcomes of that response
   · identifying socially acceptable ways to release and manage aggression
7) basic relaxation techniques.
8) effects of alcohol and other drugs have on behavior/anger management

Agencies must review and update their curriculum annually and maintain records of the annual curriculum review(s) (review records to be made available upon request).

### T2019 Therapeutic behavioral services

**Credentials:** Credentialing Requirements

Anger Management providers must have a BA/BS degree in Social Work, Psychology, Sociology, Criminal Justice or other approved Human Services degree, plus 2 years post-degree experience in counseling youth or working in a program whose primary clientele are youth with serious emotional or behavioral health needs. A Master’s degree in the stated programs may substitute for the 2 years experience.

<table>
<thead>
<tr>
<th>ID</th>
<th>Description</th>
<th>Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5001</td>
<td>AODA Assessment</td>
<td>25.00</td>
<td>Quarter Hour</td>
</tr>
<tr>
<td>H0001</td>
<td>Alcohol and/or drug assessment</td>
<td>25.00</td>
<td>Quarter Hour</td>
</tr>
</tbody>
</table>

**Credentials:** AODA outpatient clinic license and:
- Clinical Substance Abuse Counselor Certification or above OR
- MS Degree with documented 3,000+ hours of work experience preferably in a setting dealing with AODA issues OR
- Ph.D., utilizing recognized AODA assessment tools.

All providers of service must have a National Provider Identifier (NPI).

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Service</th>
<th>Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5173 H2020</td>
<td>AODA Day Services</td>
<td>60.00</td>
<td>Daily</td>
</tr>
<tr>
<td></td>
<td>Therapeutic behavioral services</td>
<td>Day services for an adult/family caregiver focusing on AODA issues and treatment.</td>
<td></td>
</tr>
</tbody>
</table>

**Credentials:**
A DHFS-CSAS (Community Substance Abuse Services) Day Treatment Certificate must be submitted in the provider application process.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Service</th>
<th>Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5349 H0009</td>
<td>AODA Detoxification</td>
<td>240.00</td>
<td>Daily</td>
</tr>
<tr>
<td></td>
<td>Alcohol and/or drug services, acute detox</td>
<td>Short-term (maximum 3-5 days) treatment for an adult parent/caregiver for acute alcohol or drug intoxication or withdrawal. Clients are monitored on a 24-hour basis by licensed physicians, nurses and certified AODA staff.</td>
<td></td>
</tr>
</tbody>
</table>

**Credentials:**
AODA Detox Certificate (DHFS Certificate-HFS 61.56)

<table>
<thead>
<tr>
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<th>Rate</th>
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</tr>
</thead>
<tbody>
<tr>
<td>5121 H0005</td>
<td>AODA Group Counseling</td>
<td>8.00</td>
<td>Quarter Hour</td>
</tr>
<tr>
<td></td>
<td>Alcohol and/or Drug Svc; grp couns.</td>
<td>NOTE: APPLICATIONS ACCEPTED FOR ACTIVE-ONGOING GROUPS ONLY. AODA Group counseling provided in a Community Substance Abuse Services Clinic (CSAS) or a certified Outpatient Mental Health Clinic under DHS 75 guidelines. A description of the group identifying the target population, objective of the group, and days/times the group meets must be included in the application to provide this service.</td>
<td></td>
</tr>
</tbody>
</table>

**Credentials:**
AODA outpatient clinic license and:
- Substance Abuse Counselor Certification or above
- Substance Abuse Counselor-In-Training certification with clinical supervisor authorization to provide counseling after one of the following requirements has been met:
  - The substance abuse counselor-in-training has completed 1000 hours of supervised training or supervised work experience in the core functions verified by the agency Clinical Supervisor
  - If an RADC I (credential by the WCB) converted to the substance abuse counselor-in-training, the credential holder may practice substance use disorder counseling after providing proof to their clinical supervisor that within the previous 5 years they have completed 100 hours of specialized education by March 1, 2007 in any combination of the performance domains listed in s. RL 166.03.

All providers of service must have a National Provider Identifier (NPI).

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</tr>
</thead>
<tbody>
<tr>
<td>5101 H0022</td>
<td>AODA Individual/Family Counseling</td>
<td>16.00</td>
<td>Quarter Hour</td>
</tr>
<tr>
<td></td>
<td>Alcohol and/or drug intervention svc</td>
<td>Individual/family counseling related to AODA issues provided in a licensed Community Substance Abuse Services Clinic (CSAS) or Outpatient Mental Health</td>
<td></td>
</tr>
</tbody>
</table>

Page 3 of 97
Clinic under DHS 75 guidelines.

Credentials: AODA outpatient clinic license and:
- Substance Abuse Counselor Certification or above
- Substance Abuse Counselor-In-Training certification with clinical supervisor authorization to provide counseling after one of the following requirements has been met:
  - The substance abuse counselor-in-training has completed 1000 hours of supervised training or supervised work experience in the core functions verified by the agency Clinical Supervisor
  - If an RADC I (credentialed by the WCB) converted to the substance abuse counselor-in-training, the credential holder may practice substance use disorder counseling after providing proof to their clinical supervisor that within the previous 5 years they have completed 100 hours of specialized education by March 1, 2007 in any combination of the performance domains listed in s. RL 166.03.

All providers of service must have a National Provider Identifier (NPI).

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<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>AODA Lab and Medical Services</td>
<td>1.00</td>
<td>Dollar</td>
<td></td>
</tr>
<tr>
<td>AODA, Lab Analysis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Random urine surveillance and other substance abuse screening and monitoring by an approved lab.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcohol and/or drug screening, lab analysis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Credentials:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laboratory certification and per unit rate.</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

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</tr>
</thead>
<tbody>
<tr>
<td>AODA Resid. Treat-With Child Behavioral health, short-term residential</td>
<td>140.00</td>
<td>Daily</td>
<td></td>
</tr>
<tr>
<td>Same as AODA Residential Treatment (Service Code 5347), except with up to four children under age of 10.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Credentials:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Based Residential Facility License</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
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<table>
<thead>
<tr>
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<th>Avg IPN Rate</th>
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</tr>
</thead>
<tbody>
<tr>
<td>AODA Residential Behavioral health, short-term residential</td>
<td>85.00</td>
<td>Daily</td>
<td></td>
</tr>
<tr>
<td>A short-term (up to 30 days) residential program for an adult caregiver to provide treatment and support for substance abuse in order to maintain their parenting role. (This service needs to be prior authorized by Provider Network Director for Wraparound or the Director of SafeNow for Safety Services.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Credentials:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Based Residential Facility License</td>
<td></td>
<td></td>
<td></td>
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</tr>
</thead>
<tbody>
<tr>
<td>Assessment Svcs-Nursing Nursing assessment/eval</td>
<td>64.00</td>
<td>Session</td>
<td></td>
</tr>
<tr>
<td>In-home assessment of physical health needs of a child performed by a RN. (A Healthcheck Screening would fall under this category.) Assessment and monitoring</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service Name / ID</td>
<td>Set IPN Rate</td>
<td>Avg IPN Rate</td>
<td>Billing Unit</td>
</tr>
<tr>
<td>------------------</td>
<td>--------------</td>
<td>--------------</td>
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</tr>
<tr>
<td>5000A 90801</td>
<td>200.00</td>
<td></td>
<td>Session</td>
</tr>
<tr>
<td>Assessments-M.D.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychiatric and/or Medical assessment of a child or adolescent and their family performed by a licensed Psychiatrist (M.D.) and/or other Medical Physician (M.D.) with recommendations for treatment. A psychiatric report of specific findings (with five axis diagnoses) must be submitted to the Care Coordinator within 30 days of the appointment.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Credentials:** Licensed M.D. with a specialty in Psychiatry/Child Psychiatry

**Effective 1/1/2007, providers of this service must have a National Provider Identifier (NPI).**

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</tr>
</thead>
<tbody>
<tr>
<td>5551 T2003</td>
<td>55.00</td>
<td></td>
<td>Session</td>
</tr>
<tr>
<td>BRICK Program</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wisconsin Green Bay Correctional facility &quot;BRICK: Program. The letters in BRICK stand for Breaking down the walls to Reality through Intervention and Counseling for Kids. Integrity Family Services, LLC coordinates Wraparound Milwaukee and SafeNow enrolled youth participation in the BRICK program which includes transporting the youth to and from the Green Bay Correctional Institution, supervision of youth participating in the half-day BRICK Program, lunch, youth discussion regarding their response to the program and completion of a &quot;client satisfaction survey&quot;. Green Bay Correctional Facility inmates who are concerned about the direction taken by many innercity youth meet with youth that attend the program to explain the reality of prison life. Inmate participants come from all cultures, various backgrounds, varying levels of education, lifestyles, and environments. BRICK Program sessions are conducted for youth identified by community agencies or the courts as being “at risk” to commit crimes.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Credentials:** This service is limited to Integrity Family Services, LLC. Integrity staff with prior experience as a Crisis Stabilization provider for Wraparound Milwaukee or equivalent training provide escort and supervision for Wraparound Milwaukee youth that participate in the BRICK Program.

Valid Wisconsin Drivers License (Drivers Abstract on file with agency)

Integrity Family Service, LLC must obtain 2 letters of reference regarding the provider’s professional abilities. Reference letters are to be maintained in the employees file at the agency.

Crisis training of 40 hours for staff with no prior crisis stabilization related experience or 20 hours for staff with 6 months of prior experience. Training must be completed prior to the provision of this service.

Training can include Crisis Prevention Intervention (CPI), Managing Aggressive Behavior (MAB) or a similar program along with other related...
in-service training; crisis intervention and de-escalation training in the following areas:

· Crisis regulations.
· Wraparound crisis intervention policies and procedures and
· Specific requirements associated with this service.
· Wisconsin state statutes and administrative rules related to patient rights and confidentiality of youth records.
· Basic mental health intervention techniques applicable to crisis situations.
· Techniques for assessing and responding to persons with emergency mental health needs who are experience a crisis or AODA related problems.

Camp is a specialized program for children with emotional, and behavioral challenges that is generally offered during non-school time and has a specific beginning and end date for each camp session (usually ranging from 1 day to 2 weeks in duration). Camp may be full day or partial day. Camp offers goal directed activities for youth that will lead to specific skill development, which is clearly identified in the agency description (example: leadership camp). Agencies providing camp shall provide a description for the specific camp/s offered by the agency to include:

1. Title or name of the “Camp” (here after referred to as “camp” or “program”).
2. Proposed daily rate for the program.
3. Location(s) where the camp/program will take place.
4. Dates and time of day the camp will be conducted.
5. Overview of the client related program objectives and goals (skills or abilities the youth will achieve as a result of participation in the program).
6. Minimum client to staff ratio.
7. Description of appropriate participants including: age, gender, challenges enrolled youth might be experiencing (ie: lack self confidence; excessively shy, etc.).
8. Skills / abilities the youth will acquire as a result of participation in the specific camp/program.
9. Minimum requirements for youth participation in the program.
10. Calendar of events including schedule of all events (by day and section of the day) to be provided throughout the course of the program.
11. Identification of equipment and supplies that will be used by participants and a list of alternate or substitute activities to be conducted in the event the scheduled activity cannot be held.
12. Meals and snacks to be provided (time for participants meals must be include in program schedule if the program is offered during a normal meal time; cost of agency provided meals to be included in daily rate).
13. Participant conduct that could result in participant expulsion from the program.
14. Transportation options (to and from program).
15. Agency contact information for referrals
16. Agency contact information during the program implementation (including: how families may contact participants in the event of an emergency).
Rates should be all inclusive. Any additional cost(s) to the participant (such as spending money for outings) must be identified at the time the program description is presented to Wraparound Milwaukee for approval.

If the agency program involves client transportation to another location, the agency must meet all the Wraparound Milwaukee requirements associated with client transport including: obtaining a parent or guardian authorization to transport the client (consent form to be signed and dated prior to program participation). The driver must be at least 18 years of age and have a valid/current driver’s license with minimum one year driving experience; driver’s abstract and adequate insurance coverage on file with the provider agency.

Overnight stays not allowed. Out-of-county travel requires Wraparound Administration approval IN ADVANCE.

Program summary and rate to be submitted to Wraparound Milwaukee for approval at least 60 days prior to the start date of the proposed program. Repeat programs to be reviewed annually.

Credentials:
A Day Care Certification or Day Care License is required if serving four to eight children under the age of seven or eight or more children to age 12.

The program supervisor must be at least 21 years of age have a minimum of a High School diploma or equivalent and have at least 1 year of experience working with children and have completed at least 24 hours of training. Training may include: early childhood training, child/human growth and development, early childhood education, first aid training, training in cardiopulmonary resuscitation, recognition of and reporting of childhood abuse and neglect, orientation to agency policies and procedures. Training may be documented via: attendance sheets, certificates of attendance or diplomas and is to be keep on file by the agency. Prior training in any of the above areas is acceptable with the appropriate supporting documentation.

Programs providing services to youth diagnosed with developmental disorders and pervasive developmental disorders must be supervised by an individual with a bachelor’s degree (or above) in human services or education with at least 2 years experience working with youth with this type of disorder.

Additional agency employees providing client supervision during the program must
have a minimum of High School diploma or equivalent with at least 2 years
(full-time) experience in working with children or adults in an education, childcare or
health care setting providing direct client services/care. Agency employees must
complete 24 hours of training as described above within 6 months of employment.
Prior training in any of the above areas is acceptable with the appropriate supporting
documentation.

Therapeutic camping, day, waiver

Credentials: A Day Care License is required if serving three or more children through the age of 12 at one time.

<table>
<thead>
<tr>
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<th>Billing Unit</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care Coordination-Daily Targeted case mgmt, per 15 min</td>
<td>27.50</td>
<td>Daily</td>
<td></td>
</tr>
</tbody>
</table>

A Care Coordinator must be in place for every child/family who is open and receiving services. The Care Coordinator assists the Wraparound child and his/her family to access mental health, social services, educational services and other services, and support the child and his/her family needs in meeting the needs and objectives of the Plan of Care. Care Coordination services include: assessment/evaluation of service needs; identifying team members involved with the child, planning meetings, developing a plan of care based on strengths and needs with the team; obtaining and arranging for formal services from agencies in the Provider Network, and informal services in the community; monitoring the Plan and revising as needed; ensuring that services from providers are being provided as called for in the Plan by agencies that have agreed to participate in the Case Plan, advocating for the client; and providing emergency interventions. Wraparound children in the program will also have access to mobile crisis services through the program (i.e. Mobile Urgent Treatment Team). Care coordination services are provided through face-to-face contact and telephone contact with the Wraparound child, family, significant others, and service providers and may be provided anywhere in the community. The Care Coordination agency may provide both care coordination services and other Network services described in this application for the same child/family. Care coordination services will be purchased through formal contracts with agencies elected on an RFP basis, and on a case-by-case basis from agencies in the Provider Network requesting and being approved as care coordination providers.

UNTIL FURTHER NOTICE, WRAPAROUND MILWAUKEE IS NOT UTILIZING ANY ADDITIONAL CARE COORDINATION AGENCIES.

Credentials: Care Coordinators must possess a BA/BS degree in Social Work, Psychology, Nursing, Occupational Therapy, or a related field with experience in Human Services work, preferably case management.

TO BE SUBMITTED TO WRAPAROUND:
A Care Coordinator must be in place for every child/family who is open and receiving services. The Care Coordinator assists the Wraparound child and his/her family to access mental health, social services, educational services and other services, and support the child and his/her family needs in meeting the needs and objectives of the Plan of Care. Care Coordination services include: assessment/evaluation of service needs; identifying team members involved with the child, planning meetings, developing a plan of care based on strengths and needs with the team; obtaining and arranging for formal services from agencies in the Provider Network, and informal services in the community; monitoring the Plan and revising as needed; ensuring that services from providers are being provided as called for in the Plan by agencies that have agreed to participate in the Case Plan, advocating for the client; and providing emergency interventions. Wraparound children in the program will also have access to mobile crisis services through the program (i.e. Mobile Urgent Treatment Team). Care coordination services are provided through face-to-face contact and telephone contact with the Wraparound child, family, significant others, and service providers and may be provided anywhere in the community. The Care Coordination agency may provide both care coordination services and other Network services described in this application for the same child/family. Care coordination services will be purchased through formal contracts with agencies elected on an RFP basis, and on a case-by-case basis from agencies in the Provider Network requesting and being approved as care coordination providers.

UNTIL FURTHER NOTICE, WRAPAROUND MILWAUKEE IS NOT UTILIZING ANY ADDITIONAL CARE COORDINATION AGENCIES.

Credentials:
Care Coordinators must possess a Master’s Degree in Social Work, Psychology, Nursing, Occupational Therapy, or a related field with experience in Human Services work, preferably case management.

TO BE SUBMITTED TO WRAPAROUND:
Copy of Care Coordinators resume, transcript or diploma, driver's abstract, and background check (all 3 parts).
have agreed to participate in the Case Plan, advocating for the client; and providing
emergency interventions. Wraparound children in the program will also have access
to mobile crisis services through the program (i.e. Mobile Urgent Treatment Team).
Care coordination services are provided through face-to-face contact and telephone
contact with the Wraparound child, family, significant others, and service providers
and may be provided anywhere in the community. The Care Coordination agency
may provide both care coordination services and other Network services described in
this application for the same child/family. Care coordination services will be
purchased through formal contracts with agencies elected on an RFP basis, and on a
case-by-case basis from agencies in the Provider Network requesting and being
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UNTIL FURTHER NOTICE, WRAPAROUND MILWAUKEE IS NOT
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Credentials:
Care Coordinators must possess a Master’s Degree in Social Work, Psychology, Nursing, Occupational Therapy, or a related field with experience in
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TO BE SUBMITTED TO WRAPAROUND:
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</tr>
</thead>
<tbody>
<tr>
<td>5502B T2022</td>
<td>Same as 5502A-but for waiver program slots</td>
<td>2.82</td>
<td>Daily</td>
</tr>
<tr>
<td>Child Mgmt-Waiver Program Case management</td>
<td>Same as 5502A-but for waiver program slots</td>
<td>2.82</td>
<td>Daily</td>
</tr>
</tbody>
</table>
| 5441 S2027        | Supervision of a child for up to 4 hours in a licensed Day Care facility (if serving
more than three children at one time). The purpose is to facilitate the attendance by
parent/legal guardian or caretaker at Child/Family Team meetings, therapy sessions,
but not for the purpose of providing child care during working hours for a
parent(s)/caregiver. | 6.00 | Hour |
| T1005              | Respite svcs, up to 15 min | | |
| Credentials:      | Same as 5502A-but for waiver program slots | | |
| Day Care License  | | | |
| 5589 S5199        | This service allows the enrolled youth’s family to purchase food items at SHARE
Mobile Market Food Sales. The Care Coordinator may authorize an emergency food
purchase where the family is in need of food and the Care Coordinator might
otherwise use discretionary funds to purchase essential food items. This service
should not be used for families that have the financial means to purchase their own
food. The Care Coordinator must enter a service authorization request (SAR) in
Synthesis and provide the family with an original copy of the “SHARE
Authorization” which has been dated and signed by the care coordinator. The
Credentials:      | Commodity - Emergency Food Purchases Personal Care Items, NOS | Dollar | |

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<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Description</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5588 S5199</td>
<td>Commodity-Food (with perishables) Personal Care Items, NOS</td>
<td>$25.00</td>
<td>Each</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Perishable and non-perishable and nutritionally balanced Family Pack containing various items of food.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5352 H2016</td>
<td>Community Support Program (CSP) Comprehensive Comm. Support Svcs, per diem</td>
<td>53.38</td>
<td>Hour</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Service only provided by Bell Therapy, Inc. A Community Support Program (CSP) is the most comprehensive and intensive community treatment model for individuals living with a severe and persistent mental illness and/or co-occurring disorders. All individuals to be served by a CSP must meet the diagnostic and functional criteria outlined in Wisconsin Administrative Code DHS 63.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A CSP is a coordinated care and treatment program that provides a comprehensive range of treatment, rehabilitation and support services through an identified treatment program and staff to ensure ongoing therapeutic involvement and person-centered treatment where participants live, work and socialize. Services are individually tailored with each participant through relationship building, individualized assessment and planning, and active involvement to achieve individual goals. Services are provided by an interdisciplinary team, which typically includes a psychiatrist, nursing staff, Masters level clinicians and mental health technicians.

Clients served in CSP who are enrolled in Wraparound Milwaukee must be at least 17½ years of age and is either transitioning directly out of Wraparound or out of the Project O’YEAH, Healthy Transitions Initiative.

CSP enrolled youth/young adults may receive both CSP and Care Coordination services for a temporary period until they transition to CSP. That transition period should be six months or less.

Credentials: Limited to SHARE Wisconsin - EXPRESS sale sites.

Credentials: Licensed Psychiatrist
<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Service Description</th>
<th>Billing Unit</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>5300 S9485</td>
<td>Crisis Bed-Foster Home Services, per diem</td>
<td>Daily</td>
<td>5300</td>
<td>60.00</td>
</tr>
<tr>
<td>Masters Level Clinician Licensed Nurse</td>
<td></td>
<td></td>
<td>A licensed foster home that accepts children on an emergency basis. Youth must be at high risk of hospitalization or other out-of-home placement, crisis at home or placement disruptions, for a crisis bed to be needed. Staff/foster parents have been trained in working with children with emotional, behavioral or mental health needs. Placements in a foster home should usually be made for periods of a few days, but should not exceed 14 days.</td>
<td></td>
</tr>
<tr>
<td>Credentials:</td>
<td>Foster Home License</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5302 S9485</td>
<td>Crisis Bed-Group Home Services, per diem</td>
<td>Daily</td>
<td>90.00</td>
<td></td>
</tr>
<tr>
<td>Crisis Intervention MH service</td>
<td></td>
<td></td>
<td>Licensed Group Home setting with staff who have been trained in working with children with emotional, behavioral, or mental health needs. Placement in a group home cannot exceed 14 days.</td>
<td></td>
</tr>
<tr>
<td>Credentials:</td>
<td>Group Home License</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5414 S9485</td>
<td>Crisis Respite and Nursery Services, per diem</td>
<td>Daily</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td>Crisis intervention mental health svc</td>
<td></td>
<td></td>
<td>Licensed shelter placement for children 12 and under who need immediate placement due to a crisis within the family. This is a short-term (up to 3 days) placement.</td>
<td></td>
</tr>
<tr>
<td>Credentials:</td>
<td>Shelter License</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5299 S9485</td>
<td>Crisis Runaway Shelter Services, per diem</td>
<td>Daily</td>
<td>105.00</td>
<td></td>
</tr>
<tr>
<td>Crisis Intervention MH service</td>
<td></td>
<td></td>
<td>A home licensed under s. 48.48 or 48.75 providing housing and services to a runaway child for up to 15 days plus a 15-day extension with consent of the child and the consent of the child’s parent, guardian or legal custodian. Such a shelter may only hold a child without the consent of the legally responsible party with proper notification to the court and required hearing as prescribed for runaway homes in s48.227. Note: For youth under the jurisdiction of the Bureau of Milwaukee Child Welfare, runaway shelters are only used when all other shelters and group homes are filled or no other resource will accept the child. The service is currently limited to one agency in the Network.</td>
<td></td>
</tr>
<tr>
<td>Credentials:</td>
<td>Agencies providing crisis runaway shelter must be licensed under the State of Wisconsin as a Child Placing Agency and Group Home.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5303 S9484, U7</td>
<td>Crisis Stabilization/Supervision Services, mental health svc</td>
<td>Hour</td>
<td>27.50</td>
<td></td>
</tr>
<tr>
<td>Crisis Stabilization and Supervision</td>
<td></td>
<td></td>
<td>Crisis Stabilization and Supervision are 1:1 services provided to Wraparound enrolled youth who due to their emotional and/or mental health needs are at risk of imminent placement in a psychiatric hospital, residential treatment center or other institutional</td>
<td></td>
</tr>
</tbody>
</table>
Crisis 1:1 stabilization is a short-term or ongoing mental health intervention provided in or outside the youth’s home, designed to evaluate, manage, monitor, stabilize and support the youth’s well-being and appropriate behavior consistent with the youth’s individual crisis/safety plan. The crisis stabilizer helps insure adherence of the youth and caregiver to the crisis/safety plan including helping the family recognize high risk behaviors, modeling and teaching effective interventions to deescalate the crisis, identifying and assisting the youth with accessing community resources that will aide in the crisis intervention and/or stabilization.

Appropriate Crisis 1:1 interventions may include:
- Providing 1:1 counseling and support.
- Providing crisis related transportation as needed.
- Implementing strategies identified in the crisis plan.
- Removing the youth from stressful situations ie: take child to an activity to reduce stress.
- Providing information and feedback to the Mobile Crisis Team and Child and Family Team.
- Documenting and writing reports.
- Attending Plan of Care, Child and Family Team and other team meetings.

Supervision is generally a short-term mental health intervention 30 to 90-days in duration that may require seven day per week/daily youth contact (face-to-face or by phone) associated with a specific circumstance or situation as identified in the youth’s crisis and/or safety plan. Supervision services are designed to aid in sustaining the youth safely in the community. Supervision assists youth who are unable to manage routine daily responsibilities by providing observation, monitoring, direction, and support services for the identified youth in areas such as: attending school, management of curfews, compliance with safety plan requirements identified in the youth’s plan of care, attendance at support or therapy sessions, taking prescribed medications or other tasks or events as specified in the individual youth’s crisis/safety plan.

A detailed description of the specific services to be provided must be documented in the individual youth’s crisis/safety plan.

S9484 Crisis Intervention MH services, per hour

Credentials: 1. Crisis Stabilization/Supervision providers must be affiliated with an agency certified by Wraparound Milwaukee to provide crisis stabilization work
with children with acute and/or intense needs.

2. Crisis Stabilization/Supervision providers must possess a High School Diploma or G.E.D. A Bachelor’s Degree in a Human Services field is desirable.

3. Agencies must obtain 2 letters of reference regarding the provider’s professional abilities. Reference letters are to be maintained in the employees file at the agency.

4. Agencies providing Crisis Stabilization/Supervision must provide training and orientation for all staff in crisis intervention and de-escalation techniques. Training shall be designed to ensure that staff have knowledge and understanding of:
   - Crisis regulations.
   - Wraparound crisis intervention policies and procedures and
   - Provider job responsibilities.
   - Relevant state statues and administrative rules including patient rights and confidentiality of youth records.
   - Basic mental health and psychopharmacology concepts applicable to crisis situations.
   - Techniques for assessing and responding to persons with emergency mental health needs who are suicidal and/or are experiencing AODA related problems.

Training can include Crisis Prevention Intervention (CPI), Managing Aggressive Behavior (MAB) or a similar program along with other related in-service training. The Director of the Mobile Urgent Treatment Team must approve new staff training curriculums. Initial training requirements are:

40 hours for staff with no prior related experience or 20 hours for staff with 6 months of experience. Training must be completed with first 3 months of employment and documented in the employee’s file at the agency.

5. Providers are required to attend at least 8 hours per year of ongoing in-service training on emergency mental health services, rules and procedures relevant to providing crisis services, compliance with state and federal regulations, cultural competency in mental health services and current issues in youth’s rights and services. Ongoing training records and certificates of that training must be documented and keep in the employee’s file at the agency.

6. Ongoing agency supervision must be provided weekly for Crisis Stabilization/Supervision providers by a Masters-level clinician with 3000 hours of supervised clinical experience or above. One hour of supervision must be provided for every 30 hours of documented client contact.

7. Crisis Stabilization/Supervision providers must be accessible with 24-hour coverage, e.g. rotating on-call coverage.

8. Agency must respond to a referral by telephone within one day (24 hours) with face-to-face contact within three days. (Refer to HFS 34 for further details.)

9. Crisis Stabilization/Supervision provider notes need to reflect the nature of and youth response to the intervention provided.

(Refer to DFS 34 and applicable Wraparound Milwaukee policies for further details.)
Crisis Stabilization and Supervision are 1:1 services provided to Wraparound enrolled youth who due to their emotional and/or mental health needs are at risk of imminent placement in a psychiatric hospital, residential treatment center or other institutional placement.

Crisis 1:1 stabilization is a short-term or ongoing mental health intervention provided in or outside the youth’s home, designed to evaluate, manage, monitor, stabilize and support the youth’s well-being and appropriate behavior consistent with the youth’s individual crisis/safety plan. The crisis stabilizer helps insure adherence of the youth and caregiver to the crisis/safety plan including helping the family recognize high risk behaviors, modeling and teaching effective interventions to deescalate the crisis, identifying and assisting the youth with accessing community resources that will aide in the crisis intervention and/or stabilization.

Appropriate Crisis 1:1 interventions may include:
• Providing 1:1 counseling and support.
• Providing crisis related transportation as needed.
• Implementing strategies identified in the crisis plan.
• Removing the youth from stressful situations i.e., take child to an activity to reduce stress.
• Providing information and feedback to the Mobile Crisis Team and Child and Family Team.
• Documenting and writing reports.
• Attending Plan of Care, Child and Family Team and other team meetings.

Supervision is generally a short-term mental health intervention 30 to 90-days in duration that may require seven day per week/daily youth contact (face-to-face or by phone) associated with a specific circumstance or situation as identified in the youth’s crisis and/or safety plan. Supervision services are designed to aid in sustaining the youth safely in the community. Supervision assists youth who are unable to manage routine daily responsibilities by providing observation, monitoring, direction, and support services for the identified youth in areas such as: attending school, management of curfews, compliance with safety plan requirements identified in the youth’s plan of care, attendance at support or therapy sessions, taking prescribed medications or other tasks or events as specified in the individual youth’s crisis/safety plan.

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Crisis Stabilization and Supervision are 1:1 services provided to Wraparound enrolled youth who due to their emotional and/or mental health needs are at risk of imminent placement in a psychiatric hospital, residential treatment center or other institutional placement.

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A detailed description of the specific services to be provided must be documented in the individual youth’s crisis/safety plan.

**Credentials:**
1. Crisis Stabilization/Supervision providers must be affiliated with an agency certified by Wraparound Milwaukee to provide crisis stabilization work
with children with acute and/or intense needs.

2. Crisis Stabilization/Supervision providers under this service area must possess a Master’s Degree or Bachelor’s Degree in a relevant area of education, human services, or health care or have a BA/BS degree in any other area with a minimum of four years training or work experience in providing mental health services. Final determination of whether such training or experience would qualify would be made by the Mobile Crisis Program Director or designee.

3. Crisis Stabilization/Supervision providers under this service area must have at least one year of full-time, pre or post degree experience in a human service area providing direct services to children or adolescents with serious emotional, behavioral or mental health conditions. Wraparound Milwaukee and Mobile Urgent Treatment Team (M.U.T.T.) will have final approval whether providers meet the qualifying experience requirement.

4. Agencies must obtain 2 letters of reference regarding the provider’s professional abilities. Reference letters are to be maintained in the employees file at the agency.

5. Agencies providing Crisis Stabilization/Supervision must provide training and orientation for all staff in crisis intervention and de-escalation techniques. Training shall be designed to ensure that staff have knowledge and understanding of:
   a) Crisis regulations.
   b) Wraparound crisis intervention policies and procedures and
   c) Provider job responsibilities.
   d) Relevant state statutes and administrative rules including patient rights and confidentiality of youth records.
   e) Basic mental health and psychopharmacology concepts applicable to crisis situations.
   f) Techniques for assessing and responding to persons with emergency mental health needs who are suicidal and/or are experiencing AODA related problems.

Training can include Crisis Prevention Intervention (CPI), Managing Aggressive Behavior (MAB) or a similar program along with other related in-service training. The Director of the Mobile Urgent Treatment Team must approve new staff training curriculums. Initial training requirements are: 40 hours for staff with no prior related experience or 20 hours for staff with 6 months of experience. Training must be completed with first 3 months of employment and documented in the employee’s file at the agency.

6. Providers are required to attend at least 8 hours per year of ongoing in-service training on emergency mental health services, rules and procedures relevant to providing crisis services, compliance with state and federal regulations, cultural competency in mental health services and current issues in youth’s rights and services. Ongoing training records and certificates of that training must be documented and keep in the employee’s file at the agency.

7. Ongoing agency supervision must be provided weekly for Crisis Stabilization/Supervision providers by a Masters-level licensed clinician with 3000 hours of supervised clinical experience or above. One hour of supervision must be provided for every 30 hours of documented client contact.

8. Crisis Stabilization/Supervision providers must be accessible with 24-hour coverage, e.g. rotating on-call coverage.

9. Agency must respond to a referral by telephone within one day (24 hours) with face-to-face contact within three days. (Refer to HFS 34 for further details.)

10. Crisis Stabilization/Supervision provider notes need to reflect the nature of and youth response to the intervention provided.

11. The BA/BS or MS level of certification is the preferred level of provider for high-risk youth.

Daily Living Skills Group provides support, training and skill development in a group setting of up to 6 clients ages 14 to 18 in the Daily Living Skills areas identified below.

Agencies are to establish an initial baseline regarding the client’s skill and knowledge
base related to Daily Living Skills. This may be accomplished through the use of a standardized assessment and client observation and is to be documented in the client record.

Training should be provided in modules by topic including, but not limited to the following areas.

1. Basic self-care, grooming and hygiene
2. Appropriate medication management and storage.
3. Use of a telephone and basic communication skills including accessing emergency police, fire and medical assistance
5. Purchase and proper/safe storage of food, household supplies and chemicals.
6. Household maintenance: making a bed; laundry skills; vacuuming and dusting; proper cleaning for kitchen and bathroom facilities; trash removal and recycling.
7. Laundry and basic mending skills for clothing/bedding.

Training can be provided at the client’s residence or at a provider agency facility. Only field trips to grocery/retail stores, laundromats or food pantries are reimbursable. Transportation time associated with field trips is reimbursable only if the client is being transported by agency staff.

This service requires a core curriculum outlining the specific course of study, which is filed with and pre-approved by the Wraparound Milwaukee Provider Network.

Skills training & development, per 15 min

Credentials: Requires minimum of High School diploma or equivalent and a minimum of 2 years (full-time) experience working with emotionally/behaviorally challenged youth or an individual with a minimum of a bachelor’s degree in a human services field or education.
following areas.

1. Basic self-care, grooming and hygiene
2. Appropriate medication management and storage.
3. Use of a telephone and basic communication skills including accessing emergency police, fire and medical assistance
5. Purchase and proper/safe storage of food, household supplies and chemicals.
6. Household maintenance ie: making a bed; laundry skills; vacuuming and dusting; proper cleaning for kitchen and bathroom facilities; trash removal and recycling.
7. Laundry and basic mending skills for clothing/bedding.

Training can be provided at the client’s residence or at a provider agency facility. Only field trips to grocery/retail stores, laundromats or food pantries are reimbursable. Transportation time associated with field trips is reimbursable only if the client is being transported by agency staff.

This service requires a core curriculum outlining the specific course of study, which is filed with and pre-approved by the Wraparound Milwaukee Provider Network.

**Skills training & development, per 15 min**

**Credentials:** Requires minimum of High School diploma or equivalent and a minimum of 2 years (full-time) experience working with emotionally/behaviorally challenged youth, or an individual with a minimum of a bachelor’s degree in a human services field or education.

**Day Treatment**

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Billing Unit</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>5170 H2012</td>
<td>Daily</td>
<td>72.00</td>
<td></td>
</tr>
<tr>
<td>Behavioral health day tx, per hour</td>
<td>Non-Medicaid Day Treatment for individual or group activities and treatment provided in a setting that also provides education. Day Treatment programs provide structure, therapy and comprehensive support services, i.e. meals, transportation to and from the site, recreation, etc. These services are goal-oriented and time limited to facilitate the child’s return to his/her home school or other public school program. This service must be prior authorized as of 9/1/03.</td>
<td></td>
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</tr>
</tbody>
</table>

**Credentials:** An Outpatient Mental Health License, Department of Public Instruction License, or Child Care Institution License must be submitted in the application process.

**Day Treatment (Medicaid-day)**

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Billing Unit</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>5172 H2012</td>
<td>Daily</td>
<td>112.00</td>
<td></td>
</tr>
<tr>
<td>Behavioral health day tx, per hour</td>
<td>Individual or group activities and treatment provided in a setting that also provides education. Day Treatment programs provide structure, therapy and comprehensive support services with meals, transportation to and from the site, recreation, etc. These services are goal oriented and time limited to facilitate the child's return to his/her home school or other public school program. These are providers whose programs meet the requirements of HSS 40 and provide at least 2 hours of treatment per day.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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These programs are often referred to as Medical Day Treatment or Partial Hospital Programs. Day Treatment plans in a T-19 program must be reviewed and signed-off on by a Psychiatrist or Psychologist.

_Credentials:_ Mental Health Day Treatment License. Agency National Provider Identifier (NPI).

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Daily</th>
<th>Daily</th>
</tr>
</thead>
<tbody>
<tr>
<td>5176 H2012 Day Treatment - Summer School Rate</td>
<td>5176</td>
<td>85.00</td>
</tr>
<tr>
<td>Behavioral health tx, per hour</td>
<td>Same service description as day treatment, except the rate is reduced as the school day is short during summer school.</td>
<td></td>
</tr>
<tr>
<td><strong>Credentials:</strong></td>
<td>Day Treatment License. Agency National Provider Identifier (NPI).</td>
<td></td>
</tr>
</tbody>
</table>

| 5174 H2012 Day Treatment Specialized (Non-Medical) | 5174 | 85.00 |
| Behavioral health tx, per hour | Day treatment program for children with specialized needs, i.e. developmentally, physically and medically challenged, requiring additional and/or specialized staffing. This is a short-term (up to 90 days) placement during which time an Individual Education Plan (I.E.P.) needs to be developed as updated by parent/legal guardian and school district to meet long-range special education needs. This service must be prior authorized. | |
| **Credentials:** | Day Treatment License. Agency National Provider Identifier (NPI). | |

| 5580 T1999 Discretionary Funds | 5580 | 1.00 |
| Misc therapeutic items & supplies NOS | Discretionary funds are used to request miscellaneous services which are not a part of Plan of Care, particularly on a one-time emergent basis. Purposes for such expenses include incentive monies, rent/security deposit, utilities, household supplies/groceries, clothes, classes, books, workshops. As a general rule, Wraparound does not make mortgage payments, ongoing rent payments, car payments, car repair payments, home repair or remodeling payments, or purchase washers, dryers, refrigerators, stoves or any other major household appliances or furniture, carpeting, etc. The goal is to help families find resources in the community to obtain these items. (Refer to Wraparound Policy #15.) | |
| **Credentials:** | | |

| 5557A H2024 Employment Preparation and Placement | 5557A | 400.00 |
| Supported employment, per diem | Employment Preparation and Placement Services are provided to a Wraparound, REACH, O'YEAH or FISS enrollee age 15-1/2 or older, or in rare cases, the parent or guardian of an enrollee, who is in need of assistance with obtaining and sustaining employment. This service is designed to assist the Service Recipient with acquiring paid employment. Payment for Employment Preparation and Placement services is “outcome based” with reimbursement being made upon achievement of each of three (3) phases or milestones. Duration of the service (three (3) phases combined) is | |

**Billing Unit**

<p>| | | |</p>
<table>
<thead>
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</table>
anticipated to be six (6) months or less. Providers of Employment Preparation and Placement Services must offer all three phases of this service.

The following services may not be provided concurrently with Employment Preparation and Placement:
- On The Job Training
- Independent Living Skills Training
- Life Skills Training, Individual and/or Group

PHASE ONE - ASSESSMENT AND EMPLOYMENT PLAN: Services must be provided 1:1 or in groups of up to eight (8) individuals. Authorizations are typically 2-4 weeks in duration. This phase must include a minimum of eight attempted (scheduled) face to face meetings. The Assessment and Employment Plan may include a formal interview and/or completion of a formal written Assessment used to assess the Service Recipient’s needs. As part of the Assessment Process, the Provider may begin training in the following areas in order to determine the Service Recipient’s level of commitment, abilities and employment related training needs. This training may include the following topics:
  - Attendance and punctuality.
  - Personal appearance; grooming, hygiene, appropriate workplace dress, value of first impressions.
  - Communication and dispute resolution.
  - Networking.
  - Filling out a job application.
  - Resume creation.
  - Obtaining references.
  - Marketing oneself to an employer; identifying personal strengths and assets.
  - Dealing with an arrest and conviction record.
  - Employer expectations.
  - Taking time off.
  - Getting to and from the job.
  - What to expect when you get your first check (i.e., taxes and other withholdings).
  - Management of Service Recipient needs other than the above that were identified during the Assessment process.

Credentials: Agency must have a written plan for the provision of the service including: assessment, training, job development, job placement and follow-up services. The Agency must identify expectations and participation requirements for the program, the criteria by which they will be measured, as well as participant conduct that could result in expulsion from the program.
Individual Direct Service Providers of this service must possess a High School Diploma or GED and must have a minimum three years work force experience and at least one year experience in providing same/similar type services;
OR
A Bachelor’s Degree in Business, Finance or Human Resources with at least one year work experience.

Employment Preparation and Placement Services are provided to a Wraparound, REACH, O’YEAH or FISS enrollee age 15-1/2 or older, or in rare cases, the parent or guardian of an enrollee, who is in need of assistance with obtaining and sustaining employment. This service is designed to assist the Service Recipient with acquiring paid employment. Payment for Employment Preparation and Placement services is “outcome based” with reimbursement being made upon achievement of each of three (3) phases or milestones. Duration of the service (three (3) phases combined) is anticipated to be six (6) months or less. Providers of Employment Preparation and Placement Services must offer all three phases of this service.

The following services may not be provided concurrently with Employment Preparation and Placement:
- On The Job Training
- Independent Living Skills Training
- Life Skills Training, Individual and/or Group

PHASE THREE - POST PLACEMENT SUPPORT: Services must be provided on a 1:1 basis. Authorizations are up to 12 weeks from the first date of employment with service intensity diminishing in proportion to the number of weeks post employment. if the Service Recipient is unsuccessful in retaining employment for 60 days, either due to voluntary or involuntary separation, the Provider is to contact the Care Coordinator to assess whether or not the Service Recipient is likely to benefit from continuing services. If the Service Recipient loses employment by no fault of their own (illness, injury, layoff, etc.) before 60 days, service reauthorization for Phase Two may be considered.

Post Placement Support services may include:
- Orientation of the Service Recipient/employee to his/her new job.
- Assistance and direction regarding management of transportation needs.
- Monitoring of job attendance, productivity and socialization (getting along with others on the job).
- Monitoring employer satisfaction with the Service Recipient/employee’s job performance.
- Assisting the Service Recipient with opening a bank account.
- Consultation with the employer regarding development of natural supports within the workplace in order to promote satisfactory job performance and sustained
employment with the goal of “fading” the need for job support from the Provider, as the Service Recipient/employee independence increases and the benefit of natural supports is realized.

H2024 Supported employment, per diem

Credentials: Agency must have a written plan for the provision of the service including: assessment, training, job development, job placement and follow-up services. The Agency must identify expectations and participation requirements for the program, the criteria by which they will be measured, as well as participant conduct that could result in expulsion from the program.

Individual Direct Service Providers of this service must possess a High School Diploma or GED and must have a minimum three years work force experience and at least one year experience in providing same/similar type services; OR A Bachelor’s Degree in Business, Finance or Human Resources with at least one year work experience.

5557B Employment Preparation and Placement Services are provided to a Wraparound, REACH, O’YEAH or FISS enrollee age 15-1/2 or older, or in rare cases, the parent or guardian of an enrollee, who is in need of assistance with obtaining and sustaining employment. This service is designed to assist the Service Recipient with acquiring paid employment. Payment for Employment Preparation and Placement services is “outcome based” with reimbursement being made upon achievement of each of three (3) phases or milestones. Duration of the service (three (3) phases combined) is anticipated to be six (6) months or less. Providers of Employment Preparation and Placement Services must offer all three phases of this service.

The following services may not be provided concurrently with Employment Preparation and Placement:
- On The Job Training
- Independent Living Skills Training
- Life Skills Training, Individual and/or Group

PHASE TWO - JOB DEVELOPMENT AND ACQUISITION: Services must be provided on a 1:1 basis. Authorizations are typically 1 to 8 weeks (Hours per week varies). If after 12 weeks, if the Service Recipient has not obtained employment, the Provider is to contact the Care Coordinator to assess whether or not the Service Recipient is likely to benefit from continuing services.

Job Development and Acquisition Services may include:
- Continuation of “Pre-Employment Training” activities from Phase One.
- Identification of potential jobs and/or employers that have new or imminent job openings that are consistent with the Service Recipient’s job goal(s) and abilities.
- Job search activities performed on behalf of the Service Recipient.
- Pre-employment contact by Provider with potential employers to identify job.
opportunities that are relevant to the Service Recipient.
- Negotiation of job restructuring and/or job creation for the Service Recipient with a potential employer.
- Activity associated with the development of the employer’s capacity to provide “natural supports” to aid the Service Recipient in job retention (natural supports are employer resources/personnel who can offer job training, support, mentoring and encouragement to the new employee).
- Obtaining and completing job applications.
- Accompanying the Service Recipient to job interviews.
- Service Recipient specific pre-employment counseling and advocacy services.

**Credentials:**
Agency must have a written plan for the provision of the service including: assessment, training, job development, job placement and follow-up services. The Agency must identify expectations and participation requirements for the program, the criteria by which they will be measured, as well as participant conduct that could result in expulsion from the program.

Individual Direct Service Providers of this service must possess a High School Diploma or GED and must have a minimum three years work force experience and at least one year experience in providing same/similar type services; OR
A Bachelor’s Degree in Business, Finance or Human Resources with at least one year work experience.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Enhanced Foster Care-Level 2 Foster care, therapeutic, child, per diem</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5308 S5145</td>
<td>Designed for youth who no longer require intensive services due to progress made in their treatment foster home, but continue to require skilled support of a professional team. These youth experience occasional disruptions in the home, school, and community settings. Twice monthly individual and family therapy within the treatment foster home.</td>
<td>75.45</td>
<td></td>
<td>Daily</td>
</tr>
</tbody>
</table>

**Credentials:** Child Placing Agency License

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Exceptional Foster Care-Level 4 Foster care, therapeutic, child, per diem</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5309 S5145</td>
<td>Designed for youth who traditionally were placed in residential treatment or other institutions. Today, through extensive services, many of these youth may be successfully maintained in a family setting. Highly skilled treatment foster parents teamed with experienced therapists are prepared to address severe disruptions in the home, school, and community. A significant strength of the program is weekly therapy with the birth family.</td>
<td>118.32</td>
<td></td>
<td>Daily</td>
</tr>
</tbody>
</table>

5309B

**Credentials:** Child Placing Agency License
Family Connections Groups is an intervention program for youth age 10 and older and their parent/guardian. Sessions are offered for girls only, boys only and co-ed groups.

Agencies offering this service must follow the curriculum established by the Council on Prevention and Education: Substances, Inc. (COPES) - Creating Lasting Family Connections. Youth and their parent/guardian attend parallel sessions once a week for 10 weeks, ending in an all-day interactive retreat. Program goals are to prevent youth from engaging in delinquent behaviors and to improve their response to conflict by strengthening family relationships.

Session include training in the following areas:
· social skills
· refusal skills
· increasing self-awareness
· expression of feelings
· interpersonal communication
· self-disclosure

Parent Modules (5 sessions each):
Developing Positive Parental Influences
Raising Resilient Youth

Youth Modules (5 sessions each):
Developing a Positive Response
Developing Independence and Responsibility

Joint Module
Getting Real - Communications Training (day-long retreat)

**Credentials:** Agency staff must be certified by the Council on Prevention and Education Substances (COPES) as a Creating Lasting Family Connections Implementation Trainer. COPES training certificate must be submitted for each staff providing this service and maintained in the agency file.
<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

this approach as needed are: adult health education, AODA education, case management, child care, developmental and psychological evaluations, psychiatric evaluations and medical management, educational and vocational assessment, family reunification services, literacy classes, GED/HSED training, health classes, individual, family and group therapy, job readiness preparation, Meta-Step transitional employment, Nurturing program designed for mothers with a substance use disorder, parenting and child development classes, permanent employment, prenatal and post-natal care coordination, relapse prevention, job retention services, and supervised visitation.

This sole-provider service must be pre-authorized by the program authority.

Credentials:

<table>
<thead>
<tr>
<th>5166</th>
<th>Female Family Systems Intervention Therapeutic behavioral service, per 15 min</th>
<th>35.00</th>
<th>Hour</th>
</tr>
</thead>
</table>

Female Family Systems Intervention (FFSI) is an In-Home Program for girls between the ages of 13 and 18 who are living at home. This service is designed to help girls learn to avoid risky behaviors such as: sexual activities, usage of drugs or alcohol and criminal activity. The program also helps girls and their parent/guardian learn to communicate more effectively. FFSI includes eight weeks of in-home services provided by an Intervention Specialist trained in FFSI. Youth have to be living at home to participate in the program.

The program consists of five modules:
1. Building Trust
2. Family Structure and Communication (sessions 2 and 3)
3. Risk Reduction (sessions 4 and 5)
4. Building A Future
5. Maintaining Strong Family Ties (sessions 7 and 8)

Families who complete the program receive post program follow-up at 1, 4 and 9 months following completion of the program.

<table>
<thead>
<tr>
<th>H0015</th>
<th>Alcohol and/or drug svcs intensive outpt</th>
<th>35.00</th>
<th>Hour</th>
</tr>
</thead>
</table>

Credentials: Intervention Specialist certified by the Medical College of Wisconsin and approved by Wraparound Milwaukee or Children’s Court Services Network. Copies of certifications from the Medical College of Wisconsin shall be maintained at the agency.

Bachelors degree or above in a healthcare or related field.

Resume substantiating education and experience working with youth and families.
Copies of Degree and resume must be submitted prior to approval in the Network.

FISS ASSESSMENT

Provider shall provide the necessary staff to conduct thorough, comprehensive interviews with parents and or legal guardians, their adolescent and any other children living in the home. The assessment shall:

• Identify the primary concerns faced by the parents/legal guardians, other caretaker(s) siblings or other children in the home, and their child;
• To make efforts and document the efforts that were made to engage the family and adolescent participation in the assessment process; and
• Direct the parents/legal guardians and their child to appropriate service contractors, i.e. Bureau of Milwaukee Child Welfare, Milwaukee County Delinquency and Court Services Division, school system or other community-based resources, consistent with their unique needs and level of concerns.

Parent(s) or legal guardians(s) and their adolescent will participate in the following steps to complete the responsibilities presented above:

• Phone/Walk-in referral is received from parent(s) or legal guardian(s) and a thorough intake is completed.
• FISS staff will conduct in-office assessments with parent(s) or legal guardian(s), and adolescent. Other children living in the home should be included whenever appropriate. Upon request and special family circumstances, home assessments will be conducted in home.
• Based on the results of the assessment, referral for services is made based on the identified concerns.
• Parent Resource and Advocacy Guide is issued to all parent(s) or legal guardian(s) participating in the program.

This referral will be based on the information received from the assessment tool provided by the BMCW with input from the MCDCSD.

RECEIPT OF REFERRALS:

Provider must ensure the provision of a single referral point is available by phone and/or to persons arriving at the office location. The FISS staff must be available to
accept referrals from parents or legal guardians between the hour of 8:00 a.m.,
Monday through Friday, excluding weekends and holidays.

During the referral, the FISS staff must ensure that the following responsibilities are
performed:

• Parents or legal guardians are informed of the FISS Access and Assessment process;
• Preliminary family data is gathered, i.e. name, address, phone, contact numbers, 
  members of the family unit, current service involvement;
• BMCW and MCDCSD service history and status is checked and verified, and;
• FISS Assessment interviews are scheduled with the parents or legal guardians, any
  other adult caretaker(s), and the adolescent within one (1) working day of the referral. 
The referral source must be contacted in order to arrange the first assessment 
  interview(s).

In cases where the family and/or child is currently receiving services with BMCW or 
with MCDCSD, the FISS staff must ensure that the families are referred back to their
assigned BMCW or MCDCSD case manager or the supervisor of the assigned case 
manager of the respective service agency within the same working day of their 
referral to the FISS Unit. The FISS Provider must also ensure that the assigned case 
manager is informed of the parents’ or legal guardian’s referral to the FISS program 
within one (1) working day of their referral to the FISS Program.

ASSESSMENT and SERVICE REFERRAL:

The FISS assessment is a structured process to identify and analyze individual and 
family dynamics and environmental conditions contributing to concerns regarding an 
adolescent’s behavior and/or family functioning. This information includes, but is not 
limited to, the following areas:

• Identification of the parents’ or legal guardians’ and the adolescent’s primary 
  concern(s);
• Description of the adolescent’s current behavior (e.g., frequency, duration, severity,
  family relationships and stability, and conflict resolution at home, school and in the 
  community,) and the status of the family’s functioning including the functioning of 
  siblings and/or other children in the home;
• Description of the parental role in responding and/or addressing the concerns 
  regarding their adolescent, including approaches to discipline;
• Identification of specific interventions/services attempted to resolve the primary 
  concern and the results of these attempt(s), and;
• Identification and review of service history including adult criminal history, CPS involvement, historical and/or current Juvenile Probation involvement, and Children’s Court history, Educational Assessment(s), and Mental Health and AODA services.

The FISS Unit must be available to assess families between the hours of 8:00 a.m. and 6:00 p.m., Monday through Friday, and between 9:00 a.m. and 12:00 p.m. on a minimum of two Saturdays per month, excluding holidays. The office will be closed for all legal State holidays.

The FISS Unit must have staff available to answer in-coming phone calls between the hours of 8:00 a.m. and 5:00 p.m. Monday through Friday.

It is estimated that it will take an average of up to four hours to complete and document all interviews, analyze the results of the interviews, determine the servicing agency, provide referrals to the identified servicing agency with families, and document the results. Supervisory consultation and approval is estimated to require an average of 30 minutes per assessment.

ASSESSMENT INTERVIEW PROTOCOL:

FISS assessment interviews will be carried out in the following sequence with the following family members:

• Adolescent
• Parent(s) or Legal Guardian(s)
• Other Adult Caretaker(s), i.e. relative
• Joint interview-Parent(s) or Legal Guardian(s), Caretakers and Adolescent

SERVICE TRANSFER:

FISS staff is responsible for providing services or transferring the family to appropriate service agencies based on the results of the assessment.

If the family has been identified to have concerns which negatively affect child safety or present the risk of or new instances of child maltreatment, an immediate referral is to be made to the BMCW Access unit at 220-SAFE consistent with the established criteria Wis. Chapter 48.13.

If the results of the assessment indicate that the concerns are primarily focused on the child and his or her behavior, consistent with established criteria Wis. Chapter
938.13, the child and his/her family are to be referred to the MCDCSD.

If the results of the assessment indicate that the concerns are primarily focused on family dynamics, parent-child conflict, and communication issues, the family will receive FISS services.

If the results indicate that the primary concern faced by the family and their adolescent related to the adolescent’s failure to attend school, the family is to be referred to their school district for appropriate intervention.

If the family and their adolescent are not appropriate for any of the above agencies, the FISS staff must identify and present to families specific resources and services within the community which will address the types and level of concerns presented by the family member.

For all types of referrals to any of the above agencies, transfer responsibilities include the following actions:

• Providing the parent(s) or legal guardian(s) with the contact person, number, and address of the designated service contractor/agency;
• Providing the designated service contractor (BMCW, MCDCSD, or community agency) with all case record information within one (1) working day of the service referral, and;
• Participating in service transfer meetings as appropriate and necessary to assist the family and the service agency.

SUPERVISORY APPROVAL:

Provider must employ a full-time supervisor. The FISS supervisor must ensure the quality and timeliness of all Assessment and Service Determination responsibilities. Methods by which supervisory support and approval of services must include, but are not limited to:

• Supervisory review of all documentation to assess quality and timeliness of information-gathering, analysis and decision-making;
• Supervisory approval of all case decision-making and documentation as indicated by supervisor signature and date;
• Facilitation of weekly individual staff consultation to review case status, to address performance concerns, and to discuss and identify staff development needs, and;
• Facilitation of weekly case staffing meetings to examine common case scenarios, to
review program status/procedural changes, to address staff development needs, and to support familiarity with local services and resources.

DOCUMENTATION:

The FISS Access and Assessment Unit must ensure that all documentation is completed in a timely manner, reflecting current case status, using the state eWISACWIS system and Synthesis system used by Wraparound Milwaukee and any additional written documentation required by DCF.

Case records, containing copies of all written documentation for families served by the FISS program must be retained in a secure but accessible central location. The FISS program staff must ensure that any BMCW, MCCC or MCDCSD requests for case documentation or any automated date are provided by the FISS Access and Assessment Unit to the requesting party within two working days of the request.

FISS staff must ensure that all documentation and client information gathered and/or created remains confidential as required by law and applicable policy. Any of the above documentation or information, recorded in any required format, will be used solely for the purposes of intervening appropriately and effectively with parent(s) or legal guardian(s) and their children or for program administration or as otherwise allowed by law.

PARENT RESOURCE AND ADVOCACY GUIDE:

The FISS program is responsible for the development and maintenance of a resource, referral, and advocacy guide for parent(s) or legal guardian(s) and their adolescents. Services must include community-based formal and informal resources, agencies, contractors, etc. Contents of the guide, referred to as the Parent Resource and Advocacy Guide must include, but are not limited to, the following information.

• Badger Care Plus Eligibility Requirements and Application Requirements
• Kinship Care Information and Eligibility Requirements
• Brochure presenting court expectations, process and sequence of events required in pro se cases
• Neighborhood Association and Community Centers within Milwaukee County
• Local youth social and peer resources
• Youth and family recreational activities
• Adolescent and family focused mental health assessment and counseling services
• Adolescent and family focused alcohol and other drug abuse assessment and
counseling services
• Crisis intervention and crisis counseling programs
• Parental support and education services
• Adolescent recreational/social support programs
• Independent living skills programming
• Bureau of Milwaukee Child Welfare-central intake number
• Milwaukee County Delinquency and Court Services Division- Central Intake Number

FISS SERVICES COMPONENT:

Provider must also provide FISS case management services to families determined to be appropriate for on-going services through the initial assessment. The services identified in a FISS service plan are designed to address the needs of the adolescent and caregiver while preventing court involvement. The caregivers must be capable and available to address the needs identified in the FISS Intake Assessment. The FISS service program includes a comprehensive combination of clinical and supportive services designed to fit the particular needs of the adolescent. FISS services are interventions designed to address the emotional, behavioral and mental health needs of the adolescent while promoting family strength and stability and access to necessary long term supports.

Service delivery is usually short-term, 3-4 months on average but may be longer depending on family needs.

Services will occur primarily in the home. Emphasis will be placed on building on the family’s strengths while seeking to control or stabilize those conditions, which threaten the family stability. Intervention strategies will always include establishing or increasing the family’s linkage to other formal or informal support services in preparation for service termination.

Service provision will be individualized to address the adolescent’s unique needs and to best assist the family.

The original services, which will be provided to any family, will be determined by the assessment, and will be identified by the FISS assessment worker. The case manager will modify subsequent and regular re-assessments of the family progress and the established services. Following is a list of the full range of core services which must be available to all families.
Service Name / ID

Set IPN Rate Avg IPN Rate Billing Unit

• Conflict resolution - mediation
• Parenting assistance - parental support
• Social/emotional support
• Basic home management
• Routine/emergency alcohol/drug abuse services
• Family crisis counseling
• Routine/emergency mental health care
• Transportation
• Food/clothing/basic needs
• Routine/emergency medical care
• Child oriented activities, such as youth recreation programs, etc.
• Independent living skills

Provider Network Services for FISS will be developed, implemented and maintained through the BHD-Wraparound Milwaukee Network. It is not the FISS assessment/services provider’s responsibility to develop the network. However, it is their responsibility to help identify formal service providers for inclusion in the Network or for identification and accessing informal resources and services.

FISS CASE MANAGEMENT:

A key FISS service is the FISS case managers. Case Managers help facilitate development of the case plan, help identify additional service needs not included in the FISS assessment and making sure those services are provided to families. The service plan must consider information provided by the adolescent, the care giver and other family members during the assessment and any other case history on the family obtained by the Bureau.

The caseload levels for FISS case managers are usually kept at 1:10 families. With an average caseload of 40-45 families per month, but sometimes as high as 60 families, the Provider must meet minimum staffing requirements but have flexibility to meet fluctuations in caseload to still be in close compliance with State’s caseload standards.

STAFFING:

Staffing for FISS assessment and FISS services provided by Provider shall be culturally diverse and dedicated to the provision of culturally competent services.
Provider shall retain staff that demonstrate the following skills:

• Ability to engage and establish rapport with clients
• Have sound and effective interviewing and information skills
• Good decision making skills
• Have basic computer skills
• Ability to attend and observe individual and familial interactions, dynamics and concerns to promote the family’s ability to constructively resolve immediate crisis.
• Knowledge of statutes, regulations and policies related to child welfare and juvenile justice
• Knowledge of community resources/services
• Knowledge of local service delivery systems

The goal of FISS program intervention is that through the provision of specific services:

1. Negative adolescent behavior will be addressed
2. The family will be stabilized
3. Causes of concerns and negative behavior are understood and
4. The Providers case managers will assist the family in developing linkages with formal, informal and natural resources and
5. These services and supports will be provided and managed and help the family gain the confidence and ability to manage the adolescent behavior without further FISS service intervention.

FISS intervention is short-term, time limited and will usually be limited to 3-4 months.

Reassessment of the Service/Care Plan for FISS Services

The primary functions of FISS assessment/services include continuous and rigorous monitoring of designated services for the adolescent and family, and regular re-assessment of the services to identify any changes in the conditions of the family which may negatively affect the family functioning and behavior of the adolescent.

The purposes of the service re-assessment and plan modification are to:

• Determine the degree to which the adolescent and family’s efforts indicate actual control an understanding of the family dynamics and functioning, meaningful recognition of concerns, and productive use of the services provided by the Provider;
•Comprehensively evaluate the family situation to begin to develop an understanding of why individual, familial and/or environmental concerns are present in order to determine what supports and resources would promote ongoing family stability and change allowing the family to manage following Provider intervention;  
•Involve the family in identifying its capacity for and role in addressing the adolescent’s needs;  
•Establish a projected date for closure with the services program, and;

The Provider must ensure that the case manager performs the following responsibilities associated with the implementation of the original Services plan within the timeframe indicated:

•Within one (1) week (seven days) of the date of the finalization of the original services plan, the case manager, all service contractors, and the family will meet to assess and discuss the implementation of the plan
•Services re-assessments will be coordinated, conducted, and documented by the case manager.
•The case manager will maintain a minimum of at least every two weeks (14 days) face-to-face contacts with the adolescent and family and will coordinate and direct the completion of reassessments monthly with the family and all services contractors to review the presence of any new concerns and assess the adequacy of the service plan;
•The case manager will immediately coordinate, direct and document, as required by the BMCW, the completion of a re-assessment at any time the adolescent and family situation changes to suggest a concern (e.g., negative behavior in the home by adolescent, significant increase of stress in the home), and;
•Based on the re-assessment, immediately determine what modifications, if any, must be made to the plan, including the types of services used, frequency of service provision, location of service provision, etc., to address adolescent behavior, stabilize family functioning, and develop linkages long-term to formal and informal resources and natural supports.

CLOSURE OF FISS SERVICES:

The Provider must ensure the development and implementation of a closure process, which is initiated in a consistent and responsible manner by the case managers. The closure process must include a final re-assessment and documentation of actual linkages of ongoing supports and resources, the date of closure, and the reasons for closure. The Provider must provide final approval to all closures advanced by the case managers.
There may be families who participate in the entire FISS program in which service intervention may not provide the necessary and/or needed relief to the problems experienced by the adolescent. These families may require the involvement of the Milwaukee Children’s Court System. Families requesting to file a pro se petition will be referred back to the Assessment unit for a re-assessment of the current issues. If court intervention is determined to be the most appropriate course for the family, the Bureau staff will file a petition with the District Attorney’s office at the Milwaukee Children’s Court Center.

DOCUMENTATION RESPONSIBILITIES FOR FISS SERVICES:

The Provider must ensure the timely and regular documentation of all contacts with the family, services reassessments, service plan modifications, and service provision, by the case manager. The Provider must ensure that all case managers and service contractors document all contacts with a family, including the parties involved in the contact, the purpose of the contact, and the nature, content, and results of that contact. The Provider must ensure that the case manager collects this documentation from each services contractor in a timely manner, and maintains all documentation related to the family in a single case file.

The Provider must ensure that all documentation is completed in a timely manner, as required by the DCF and by law, using the eWiSACWIS system and any additional written documentation formats and requirements.

SPACE NEEDS:

Services must be provided at a single site which is accessible to families and convenient to Wraparound Milwaukee for coordination with BHD Wraparound and REACH programs, mobile urgent treatment team and other services. Space must be available on weekends (Saturdays) and have sufficient waiting room space, phones, multiple offices for interviewing and for staff, access to computers, linkage with Synthesis and eWiSACWIS. It must be handicapped accessible and meet standards of American with Disability Standards.

Provider must be able to furnish at least seven to eight BA/BS degree or MS or MSW staff with at least two years experience working with the target population of youth. Preferably at least one staff will be bilingual. Provider must be able to demonstrate the staff providing FISS services have the following knowledge and experience:

a. Assessment and treatment skills working with youth with emotional and mental
b. Knowledge of solution focused, short-term treatment approaches to working with youth with emotional and behavioral challenges and their families

c. Knowledge of wraparound philosophy and approaches including individualized, strength-based, family focused care

d. Knowledge and experience in use of community resources

e. Experience working with other child serving systems, i.e., child welfare, juvenile justice and education

f. Knowledge of children’s court systems, child welfare statutes and policies

g. Knowledge of case management and crisis intervention

Unit of Payment – Unit of reimbursement will be daily rate for open FISS cases anticipated for 2013 to be $23.00 per day per enrolled family case plus an estimated $180.00 per FISS assessment based on maximum of 850 assessments per year.

Outcome Measures and/or Indicators that the Provider will be evaluated on:

1. Results of Family Satisfaction Surveys – provider will be evaluated on 5 point scale using Wraparound Milwaukee and satisfaction survey tool and maintain at least a 4.2 rating on that tool.

2. 95% of FISS Assessments will be scheduled within one day of receiving the referral

3. For 95% of FISS families who have been assessed, FISS staff will identify and present to the families specific resources and services within the community which will address the types and level of concerns presented by the family member.

4. 95% of Community Service Providers, Bureau of Milwaukee Child Welfare or Delinquency and Court Services will be provided with all case record information within one day of referral.

5. The FISS Provider must develop a Parents Resource and Advocacy Guide and that guide of services and resources must be approved by the Bureau of Milwaukee Child Welfare and BHD Wraparound as Purchaser and kept updated and revised as needed.

6. For 95% of cases assigned to FISS services unit, within one week (seven days) of the date of the finalization of the original FISS services plan, the case manager, all service contractors and the family will meet to assess and discuss the implementation of the plan.

7. For 90% of all FISS service cases, the case manager will maintain a minimum of at least two face-to-face contacts per month with the adolescent and family.

8. 80% of all families referred to FISS will not be re-referred to the Bureau of Milwaukee Child Welfare or Children’s Court for services within six months of closure of a FISS services case.

Credentials: FISS Assessment providers must possess a Bachelor of Arts or Bachelor of Science degree in social work, psychology, nursing, occupational therapy or

Page 37 of 97
other human service field or Bachelor of Arts or Bachelor of Science degree in a related field with at least one year's experience in child Welfare, mental health, or juvenile justice. Experience in Case Management is also desirable.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
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<tbody>
<tr>
<td>5502A T2022 FISS Case Management</td>
<td>21</td>
<td>21</td>
<td>Daily</td>
</tr>
</tbody>
</table>

**STATE CONTRACTED SERVICE ONLY:**
Responsible for providing, coordinating and managing the provision of service and for insuring the completion of program requirement for each assigned family.

Duties include:

a. Meet with family to identify needs and assign the necessary providers. (The initial Assessment Worker creates the preliminary treatment plan and services.)
b. Finalize the safety plan with the initial assessment worker.
c. Direct the implementation of the necessary services as required and insure services are provided at the level and frequency identified in the safety plan.
d. Maintain weekly face-to-face contact with the family and direct the completion of weekly child safety re-assessments with safety service providers.
e. Make modifications to the safety plan as necessary and implement changes as needed in services.
f. Identify and analyze the causes of safety concerns and assist the family in developing linkages to services and resources.
g. Contact the initial assessment worker if at any time the child is not deemed safe to determine the need and procedure for temporary removal of the child.

**Credentials:**
Case Managers must possess a Bachelor of Arts or Bachelor of Science degree in social work, psychology, nursing, occupational therapy or other human service field or Bachelor of Arts or Bachelor of Science degree in a related field with at least one year's experience in child Welfare, mental health, or juvenile justice. Experience in Case Management is also desirable.

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<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
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<tbody>
<tr>
<td>5390 H0042 Foster Home Care Foster Care, non-therapeutic, per diem</td>
<td>27.00</td>
<td>Daily</td>
<td></td>
</tr>
</tbody>
</table>

Foster homes are licensed and must meet State (HSS-56) guidelines. Foster home care is an alternative living situation for children who cannot live with their families. Foster home care provides a home environment with a daily living routine and supervision. Rates may vary based on intensity of needs. Supportive services through the Provider Network are available as needed. Rate is individualized and must be pre-authorized on a case-by-case basis before service is requested on the Service Authorization Request. (Refer to Wraparound Policy #19.)

**Credentials:**
Foster Home License

<table>
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<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
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<tbody>
<tr>
<td>5390A H0042 Foster Home Care-2nd Child Foster Care, non-therapeutic, per diem</td>
<td>27.00</td>
<td>Daily</td>
<td></td>
</tr>
</tbody>
</table>

Same as for Service Code 5390 -- This code is only used when a second child is in the same foster home but has a different rate than the first child. Aggie Hale, 11/9/11

**Credentials:**
Same as for Service Code 5390.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
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<tbody>
<tr>
<td>5393 H1011 Foster Home Licensing Family Assessment by Lic. Beh. Health Prof .</td>
<td>2500.00</td>
<td>Each</td>
<td></td>
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</table>

To provide foster care recruitment and licensing.
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<thead>
<tr>
<th>Service Name / ID</th>
<th>Billing Unit</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Agency Placing License</td>
<td>Foster Home Maintenance</td>
<td>Hour</td>
<td>42.50</td>
</tr>
<tr>
<td>Foster Home Maintenance is intended to provide maintenance for La Causa and Fresh Start licensed regular foster homes being utilized by Wraparound enrolled children. These agencies provide regular contact and support to foster parents to maintain licensing requirements and improve quality of care.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Agency Placing License</td>
<td>H2019</td>
<td>Quarter Hour</td>
<td>8.00</td>
</tr>
<tr>
<td>Group Counseling and Therapy Therapeutic Behavioral Services</td>
<td>Group Counseling and Therapy-QTT</td>
<td>Quarter Hour</td>
<td>6.40</td>
</tr>
<tr>
<td>Group Psychotherapy services can be provided by following qualified psychotherapists:</td>
<td>Group Psychotherapy</td>
<td>Quarter Hour</td>
<td>6.40</td>
</tr>
</tbody>
</table>

- APPLICATIONS ACCEPTED FOR ACTIVE-ONGOING GROUPS ONLY -

Goal directed face-to-face psychotherapeutic intervention with the child/family member(s) and/or other caregivers who are treated at the same time in a certified outpatient mental health setting. Focus is on improved peer relationships, communication skills, anger control, improved problem-solving skills, etc. A description of the group identifying the target population, objective of the group, and days/times the group meets must be included in the application to provide this service.

Providers of Group Therapy services must also satisfactorily complete the Wraparound Milwaukee Practitioner Credentialing process and have a National Provider Identifier (NPI).
communication skills, anger control, improved problem-solving skills, etc. A description of the group identifying the target population, objective of the group, and days/times the group meets must be included in the application to provide this service.

NOTE: in order for services rendered by the Qualified Treatment Trainee (QTT) to be reimbursable, a QTT with a graduate degree is required to be working toward full licensure.

Credentials: Services provided by Qualified Treatment Trainees with a Graduate Degree who are working toward full clinical licensure must meet the following criteria:

- Have a Graduate degree from an accredited institution with course work in psychology, counseling, marriage and family therapy, social work, nursing or a closely related field.
- Have not yet completed the applicable supervised practice requirements described under ch. MPSW 4, 12, 16 or Psy 2, Wis. Admin. Code, as applicable.

Providers of Individual/Family Therapy services must also satisfactorily complete the Wraparound Milwaukee Practitioner credentialing process and have a National Provider Identifier (NPI). It is also required that the QTT Supervisor have been credentialed with Wraparound Milwaukee at time of application.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5400 H0018 Group Home Care Behavioral Health, short-term resid, non-hospital</td>
<td>180.00</td>
<td>Daily</td>
<td></td>
</tr>
</tbody>
</table>

A licensed group home providing care and 24-hour supervision as an alternative living situation for children who temporarily cannot live with their families.

Credentials: A Group Home License under Wisconsin State Statutes 48.60-48.77 must be submitted in the application process, along with documentation from the State Bureau of Fiscal Services establishing the daily rate. Such documentation must also be attached to any increase in the daily rate to justify the rate increase.

A description of the treatment/activities provided in the group home must be provided in the application process.

All group homes in the Wraparound Provider Network must meet Wisconsin Medicaid requirements as a crisis stabilization provider regarding staffing, documentation and supervision.

Group homes must have a staff member qualified under HFS 34.21 (3)(b) 1-8 available for consultation in person or by phone at all times the program is in operation.

Group homes must document daily progress notes relevant to their provision of mental health crisis services.

Group homes shall maintain accurate and current documentation of all staff members’ qualifications, including copies of degrees, training certificates, licenses, etc. and shall verify that all staff meet the minimum requirements listed in HFS 34.21 (3)(b) 1-19. All other requirements relevant to hiring under caregiver law in Wisconsin apply. Supervision and training shall be provided as follows:
a) Volunteers shall be supervised by an employee who qualifies under (3)(b) 1-8.
b) Staff not qualified under (3)(b) 1-8, or who do not have 3000 hours of supervised clinical experience, shall receive a minimum of 1 hour of clinical supervision for every 30 hours of face-to-face emergency mental health services they provide.
c) Staff qualified under (3)(b) 1-8 who have 3000 hours of supervised clinical experience shall participate in a minimum of 1 hour of peer clinical supervision for every 120 hours of face-to-face emergency mental health services they provide.
d) Day to day clinical supervision and consultation shall be provided by a mental health professional qualified under (3)(b) 1-8.
e) All clinical supervision shall be documented, and this documentation shall be maintained on site.
f) Group homes shall provide program orientation for all new staff and volunteers. Staff with less than 6 months of experience shall complete a minimum of 40 hours of documented orientation during their first 3 months. Staff with 6 or more months of experience shall complete a minimum of 20 hours of documented orientation in the first 3 months. Volunteers shall complete a minimum of 40 hours of orientation before working directly with clients.
g) Group homes shall provide a least 8 hours of training to regular staff, per year, and keep documentation of this training.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5403 S9484 Group Home Crisis Supervision</td>
<td>70 Hour</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Crisis Intervention MH services, per hour</td>
<td>Clinical supervision of group home staff as required under HFS 34.21 (3)(b) 1-19. This supervision may include direct review, assessment and feedback regarding each program staff member’s delivery of emergency mental health services. Clinical supervision is accomplished by one or more of the following means: 1) individual sessions with staff members to review cases and assess performance; 2) individual on-the-job observation of staff during which the supervisor assesses, teaches and gives advice regarding the staff member’s performance; group meetings. All such supervision must be documented in writing in the form of an ongoing log, monthly summary, etc. This service is reimbursed separately only for group homes who must contract for this service with a clinician specifically to meet the HFS standards for crisis billing. Group homes with HFS-qualified MSW clinicians on staff are not reimbursed separately for this.</td>
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</tbody>
</table>

Credentials:  The required credentials are a Masters level, 3000+ hour clinician with experience in working with DD and SED children.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5402 H0018 Group Home-Specialized Behavioral Health, short-term resid, non-hospital</td>
<td>160.00 Daily</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Crisis Intervention MH services, per day</td>
<td>Only for specialized needs: teens with babies, developmentally disabled or youth with cognitive impairments.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Credentials:  A Group Home License under Wisconsin State Statutes 48.60-48.77 must be submitted in the application process, along with documentation from the State Bureau of Fiscal Services establishing the daily rate. Such documentation must also be attached to any increase in the daily rate to justify the rate increase.

A description of the treatment/activities provided in the group home must be submitted in the application process.

All group homes in the Wraparound Provider Network must meet Wisconsin Medicaid requirements as a crisis stabilization provider regarding staffing, documentation and supervision.

Group homes must have a staff member qualified under HFS 34.21 (3)(b) 1-8 available for consultation in person or by phone at all times the program is in operation.

Group homes must document daily progress notes relevant to their provision of mental health crisis services.
Group homes shall maintain accurate and current documentation of all staff members’ qualifications, including copies of degrees, training certificates, licenses, etc. and shall verify that all staff meet the minimum requirements listed in HFS 34.21 (3)(b) 1-19. All other requirements relevant to hiring under caregiver law in Wisconsin apply. Supervision and training shall be provided as follows:

a) Volunteers shall be supervised by an employee who qualifies under (3)(b) 1-8.
b) Staff not qualified under (3)(b) 1-8, or who do not have 3000 hours of supervised clinical experience, shall receive a minimum of 1 hour of clinical supervision for every 30 hours of face-to-face emergency mental health services they provide.
c) Staff qualified under (3)(b) 1-8 who have 3000 hours of supervised clinical experience shall participate in a minimum of 1 hour of peer clinical supervision for every 120 hours of face-to-face emergency mental health services they provide.
d) Day to day clinical supervision and consultation shall be provided by a mental health professional qualified under (3)(b) 1-8.
e) All clinical supervision shall be documented, and this documentation shall be maintained on site.
f) Group homes shall provide program orientation for all new staff and volunteers. Staff with less than 6 months of experience shall complete a minimum of 40 hours of documented orientation during their first 3 months. Staff with 6 or more months of experience shall complete a minimum of 20 hours of documented orientation in the first 3 months. Volunteers shall complete a minimum of 40 hours of orientation before working directly with clients.
g) Group homes shall provide a least 8 hours of training to regular staff, per year, and keep documentation of this training.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Billing Unit</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>5113B 90806</td>
<td>Health and Behavior Consultation, Ong Individual psychotherapy, 45-50 minutes</td>
<td>100.00</td>
<td>Session</td>
</tr>
</tbody>
</table>

This service is only provided by the Medical College of WI. A follow up consultation after the initial (5113A - Health and Behavior Initial Assessment) up to five sessions per month, for psychological services that address behavioral, social, and psychophysiological conditions in the treatment or management of patients diagnosed with physical health problems. Services shall assess and/or address patient adherence to medical treatment, symptom management, health promoting behaviors, health related risk-taking behaviors and/or overall adjustment to physical illness.

**Credentials:** Provider of this service must possess a current Wisconsin Psychologist License.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Billing Unit</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>5113A 96101</td>
<td>Health and Behavior Initial Assessment Psychological Testing</td>
<td>100.00</td>
<td>Session</td>
</tr>
</tbody>
</table>

This service is only provided by the Medical College of WI. A one-time (per episode of care), one on one and face to face health-focused initial clinical assessment and/or consultation for psychological services that address behavioral, social, and psychophysiological conditions in the treatment or management of patients diagnosed with physical health problems. Services shall assess and/or address patient adherence to medical treatment, symptom management, health promoting behaviors, health related risk-taking behaviors and/or overall adjustment to physical illness.

**Credentials:** Provider of this service must possess a current Wisconsin Psychologist License.

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<thead>
<tr>
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<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>5132 H2028</td>
<td>High Risk Counseling and Therapy Sex Offender Treatment Service</td>
<td>20.00</td>
<td>Quarter Hour</td>
</tr>
</tbody>
</table>

Face-to-face psychotherapy for high risk and/or abuse-specific populations (an individual and/or family/caregiver) requiring skilled and sensitive interventions. Such high risk populations include, but are not limited to, youth with a history of sexual/physical abuse, victimization, eating disorders, sexual orientation and gender
identity concerns. Agencies wishing to provide the service must identify the target population at the time of application to provide the service.

**Credentials:**
Applications to provide High Risk Counseling and Therapy are subject to review and approval by the Wraparound Milwaukee High Risk Management staff. Qualified Psychotherapists must also provide supporting documentation (i.e.: resume; training certificates; etc.) that details any additional training and at least two years (full time equivalent) experience working with the target high risk population they have identified in their application to provide High Risk Counseling and Therapy services.

**Licensing Requirement:**

1. Wisconsin Licensed Practitioners Practicing Privately or in a Wisconsin Certified Clinic.
   - Licensed Clinical Social Worker
   - Licensed Marriage and Family Therapist
   - Licensed Professional Counselor

2. Music, Art, Dance Therapist with Wisconsin Psychotherapy License

Providers of High Risk Counseling and Therapy services must also satisfactorily complete the Wraparound Milwaukee Practitioner Credentialing process and have a National Provider Identifier (NPI).
<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Billing Unit</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>5163PHI H2019</td>
<td>Hour</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td>Home-Based Behavioral Mgm-PhD Therapeutic behavioral service, per 15 min</td>
<td>This service is designed for children with a dual diagnosis of Developmental Disability and Serious Emotional Disorders, i.e. Autism, who present with behavioral challenges in their home, school and community and are at risk for Residential Care. The Home Based Behavioral Management, PhD, will assess the needs of youth and family to develop a behavioral treatment plan in coordination with the Plan of Care and IEP and will supervise the Behavioral Management Team, including Lead, Tech, and/or Aide, as appropriate. The role of the Home Based Behavioral Management, PhD, will be for initial assessment, development of a treatment plan, and monitoring the implementation of the plan.</td>
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<td></td>
</tr>
<tr>
<td>5164 H2019</td>
<td>Hour</td>
<td>50.00</td>
<td></td>
</tr>
<tr>
<td>Home-Based Behavioral Mgm-Technician Therapeutic behavioral service, per 15 min</td>
<td>This service is designed for children with a dual diagnosis of Developmental Disability and Serious Emotional Disorders (i.e. Autism) who present with behavior challenges in their home, school and community and are at risk for Residential Care. The behavioral management technician will be responsible for training the parent/s or caretaker (and possibly teacher/s at the child's school) on the use of specific behavioral approaches, to model these approaches and provide feedback and support on the application of the techniques (under the direction of the Lead Behavioral Management Staff Member).</td>
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<td></td>
<td></td>
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<tr>
<td>S5130</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Homemaker services NOS</td>
<td>Includes services to the family or caregiver to support the child/children identified in the case plan to allow them to return to or remain in the home. Includes teaching skills such as budgeting, money management, cooking, cleaning, etc., to the child and/or caregiver. May include providing chore services.</td>
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</tbody>
</table>

**Credentials:** The required credentials are a PhD level clinician with a minimum of five years of experience working with Developmentally Disabled clients. Copies of Degree and documentation of experience working with individuals with Developmental Disabilities must be submitted prior to approval in the Network.

**Credentials:** The person providing this service must possess a BS degree in a Human Service field and at least six months experience working with Developmentally Disabled clients. This person must be supervised by the Clinical Lead (as described in Service Code 5163) and will be directly involved with the child and family in implementing the behavioral treatment plan in the home, school and community.

**Credentials:** High School Diploma or G.E.D. Basic math and money management skills; physical ability to assist in cleaning/basic household chores.

**NOTE:** Do NOT need to submit copy of H.S. Diploma or G.E.D. Certificate to Wraparound (Maintain in agency file only.)
Assistance with locating, securing, and retaining affordable and safe housing, including obtaining or providing housing referral services, identifying relocation needs, mediating disputes with landlord, and other identified housing needs as needed. Services must reflect individual needs and housing preferences and can be provided to older youth under 18 who have been approved for independent living, young adults over 18 seeking their first independent housing, or to the parent(s) or legal guardian(s) of an enrolled youth. Any client referred for this service must have an existing source of income. Payment is outcome based, with payment upon completion and documentation in Synthesis of each service milestone as follows: Phase I payable upon completion of Housing Assessment; Phase II payable upon Housing Acquisition; Phase III payable upon 90 days of Housing Retention. Providers are strongly encouraged to consider affordability guidelines as follows: Monthly rent should not exceed 50% of tenant’s gross monthly income.

PHASE ONE - ASSESSMENT, must include the following:
1. An identification of housing preferences, including: property type, location, accessibility needs (as necessary), transportation access, proximity to employment or school, roommate criteria, children, pets, etc.
2. An identification of potential barriers to housing access and retention, such as credit history, legal history, lack of references, independent living needs, etc.
3. An identification of financial and budgeting needs, including current and projected source(s) of income and personal expenses.
4. If identified as a need, Phase I must include assistance with application to the Milwaukee County Rent Assistance program and City of Milwaukee Rent Assistance program for a Section 8 housing voucher, and with the City of Milwaukee Housing Authority for low income housing, as wait lists permit.
5. If client’s housing needs, preferences, and ability to pay do not meet affordability guidelines listed here, or are otherwise not viable, agency may end services and will be eligible for Phase I payment, or may continue services through Phases II and III with documentation of notification to client of risks associated with excessive housing costs.
6. All follow up contacts with client, landlord, and collaterals are to be documented in the client file, using the Wraparound Housing Assistance Progress Report Log.

Service Documentation – A milestone report must be completed in Synthesis and shall include the following elements:

1. An identification of housing preferences, including: location, accessibility needs (as necessary), transportation access, proximity to employment or school, roommate preferences, etc.
2. An identification of potential barriers to housing access and retention, such as credit history, legal history, lack of references, independent living needs, etc.

3. An identification of financial and budgeting needs, including determination of all sources of income and expenses.

In addition to Synthesis report, all follow up contacts with client, landlord, and collaterals are to be documented in the client file using the Wraparound Housing Assistance Progress Report Log.

H2015

Credentials:

Agency - During the application process, agencies must show evidence of prior experience specific to the provision of this service. The Agency must have a written plan for the provision of the service to be submitted at the time of application, to include all materials used to verify housing quality.

Direct Service Provider – provider must have a High School Diploma or G.E.D and a minimum of 6 months of prior work experience in the field. Provider must have a familiarity with basic lease agreements and knowledge of community housing resources and local housing market.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5595C</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>H2015 Housing Assistance-Phase Three Comprehensive Comm. Support Svs, per diem</td>
<td>700</td>
<td>Total</td>
<td></td>
</tr>
</tbody>
</table>

Assistance with locating, securing, and retaining affordable and safe housing, including obtaining or providing housing referral services, identifying relocation needs, mediating disputes with landlord, and other identified housing needs as needed. Services must reflect individual needs and housing preferences and can be provided to older youth under 18 who have been approved for independent living, young adults over 18 seeking their first independent housing, or to the parent(s) or legal guardian(s) of an enrolled youth. Any client referred for this service must have an existing source of income. Payment is outcome based, with payment upon completion and documentation in Synthesis of each service milestone as follows: Phase I payable upon completion of Housing Assessment; Phase II payable upon Housing Acquisition; Phase III payable upon 90 days of Housing Retention. Providers are strongly encouraged to consider affordability guidelines as follows: Monthly rent should not exceed 50% of tenant’s gross monthly income.

PHASE THREE - RETENTION

Follow up must occur for a minimum of ninety days from move in date and must include, at a minimum, weekly direct phone contact with enrollee, monthly home visit, and monthly direct phone contact with landlord, to identify any issues which may affect housing retention. All follow up contacts with client, landlord, and collaterals are to be documented in the client file, using the Wraparound Housing Assistance Progress Report Log.

Service Documentation – A milestone report must be completed in Synthesis and shall include the following elements:
After 90 days from move in date, Agency must obtain and retain in the client file a signed statement from the landlord verifying that the tenant is in good standing with his/her lease, has not violated any conditions of his/her lease, and is not under any lease stipulations or eviction proceedings.

In addition to Synthesis report, all follow up contacts with client, landlord, and collaterals are to be documented in the client file using the Wraparound Housing Assistance Progress Report Log.

H2016

**Credentials:**

Agency - During the application process, agencies must show evidence of prior experience specific to the provision of this service. The Agency must have a written plan for the provision of the service to be submitted at the time of application, to include all materials used to verify housing quality.

Direct Service Provider – provider must have a High School Diploma or G.E.D and a minimum of 6 months of prior work experience in the field. Provider must have a familiarity with basic lease agreements and knowledge of community housing resources and local housing market.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5595B H2016</td>
<td>700</td>
<td>Total</td>
<td></td>
</tr>
<tr>
<td>Housing Assistance-Phase Two Comprehensive Comm. Support Svc, per diem</td>
<td>Assistance with locating, securing, and retaining affordable and safe housing, including obtaining or providing housing referral services, identifying relocation needs, mediating disputes with landlord, and other identified housing needs as needed. Services must reflect individual needs and housing preferences and can be provided to older youth under 18 who have been approved for independent living, young adults over 18 seeking their first independent housing, or to the parent(s) or legal guardian(s) of an enrolled youth. Any client referred for this service must have an existing source of income. Payment is outcome based, with payment upon completion and documentation in Synthesis of each service milestone as follows: Phase I payable upon completion of Housing Assessment; Phase II payable upon Housing Acquisition; Phase III payable upon 90 days of Housing Retention. Providers are strongly encouraged to consider affordability guidelines as follows: Monthly rent should not exceed 50% of tenant’s gross monthly income.</td>
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</tbody>
</table>

**PHASE TWO - ACQUISITION**

Housing must conform to Assessment needs and preferences. All housing units must be physically pre-inspected by Agency to verify that they are suitable for habitation, using the Department of Housing and Urban Development (HUD)’s Housing Quality Standards inspection form (http://portal.hud.gov/hudportal/documents/huddoc?id=DOC_11742.pdf), or a similar, pre-approved document.

Agency may be eligible for Phase II payment if client declines more than one property which meets all Assessment criteria.

All follow up contacts with client, landlord, and collaterals are to be documented in
the client file, using the Wraparound Housing Assistance Progress Report Log.

Service Documentation – A milestone report must be completed in Synthesis and shall include the following elements:

1. Address of rental unit.
2. Name, address, and telephone for landlord.
3. Terms of lease, including rent amount.
4. Date of lease signing, and move in date.
5. Documentation of physical inspection of unit.

In addition to Synthesis report, all follow up contacts with client, landlord, and collaterals are to be documented in the client file using the Wraparound Housing Assistance Progress Report Log. After 90 days from move in date, Agency must obtain and retain in the client file a signed statement from the landlord indicating that the tenant is in good standing with his/her lease, has not violated any conditions of his/her lease, and is not under any lease stipulations or eviction proceedings.

**H2015**

**Credentials:**
Agency - During the application process, agencies must show evidence of prior experience specific to the provision of this service. The Agency must have a written plan for the provision of the service to be submitted at the time of application, to include all materials used to verify housing quality.

Direct Service Provider – provider must have a High School Diploma or G.E.D and a minimum of 6 months of prior work experience in the field. Provider must have a familiarity with basic lease agreements and knowledge of community housing resources and local housing market.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-Home Case Aide</td>
<td>30.00</td>
<td></td>
<td>Hour</td>
</tr>
<tr>
<td>Multi-systemic therapy for juveniles</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The In-Home Case Aide is always the second person on a two-person team. A Medicaid reimbursable Lead Therapist (see code 5160) must supervise the Case Aide. (The Case Aide and Lead Therapist must be from the same agency).

Medicaid In-Home Treatment is intensive, time limited therapy for a youth with a SED diagnosis (Serious Emotional Disorder) and/or their family/caregiver. Services are provided in the client’s home or in rare instances a community-based setting (i.e. when a neutral location is required). Youth served may be at imminent risk of out-of-home placement including a Residential Care Center or a psychiatric hospital, or require this service as an alternative to continued placement in one of those settings. All services provided must be directly related to the client’s emotional/behavioral needs. Appropriate services may deal with family issues related to the promotion of healthy functioning, behavior training and feedback to the family. Services that are primarily social or recreational are not reimbursable. Identified needs, measurable goals and the intensity of treatment should be consistent with the youth/family plan of care. Intensive In-home therapy is generally a “family all”
multi-systemic focused service. It is NOT acceptable practice to use this code to provide individual or family counseling/psychotherapy. (See Wraparound In-Home Policy for more information.)

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Description</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>H2019</td>
<td>Therapeutic behavioral service, per 15 min</td>
<td>5160</td>
<td>60.00</td>
<td>Hour</td>
</tr>
<tr>
<td>CREDENTIALS</td>
<td>The In-Home Aide must possess one of the following credentials:</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

(1) An individual with a minimum of a BA/BS Degree in a behavioral health field, a registered nurse, an occupational therapist, a WMAP-certified AODA counselor or professional with equivalent training and at least 1000+ hours of supervised clinical experience working in a program whose primary clients are emotionally and behaviorally disturbed youth/children/families;

or

(2) An individual with minimum of 2000+ hours of supervised clinical experience (without a degree) working in a program whose primary clientele are emotionally and behaviorally disturbed youth/children/families.

DOCUMENTATION REQUIREMENTS
Copy of the individual’s degree. Proof of experience must be documented in one or more letters of reference supporting the supervised experience or a resume with written corroboration of prior experience by current employer.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>H2033</td>
<td>Multi-systemic therapy for juveniles</td>
</tr>
</tbody>
</table>
In-Home Lead services can be provided by:

1. Wisconsin Licensed Practitioners Practicing Privately or in a Wisconsin Certified Clinic.
   - Licensed Clinical Social Worker
   - Licensed Marriage and Family Therapist
   - Licensed Professional Counselor
   - Licensed Psychologist
   - Psychiatrist

2. Music, Art, Dance Therapist with Wisconsin Psychotherapy License

3. Other Qualified Professionals in a Certified Outpatient Psychotherapy Clinic
   - Practitioner with a status Approval (3000 hour) Psychotherapy Letter issued by the Wisconsin Department of Health Services, Division of Quality Assurance (DHS, DQA).

Providers of In-Home Medicaid Lead services must also satisfactorily complete the Wraparound Milwaukee Practitioner Credentialing process and have a National Provider Identifier (NPI).

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5569 H2014</td>
<td>Varies</td>
<td>79.00</td>
<td>Daily</td>
</tr>
<tr>
<td>Independent Living Skills Training</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skills training &amp; development, per 15 min</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Youth appropriate for this services would:

- At least 16 year of age
- Have an IQ of 70 or above
- Be independent in daily self-care activities
- Be in need of skill training associated with living on their own and obtaining employment
- Be capable of managing their own living quarters
- Be capable of taking public transportation (i.e., city bus)
- Nearing age 18 and preparing to received Supported Independent Living or have a plan in place for moving into their own apartment or minimally supervised living arrangement with would occur just prior to or immediately following their 18th birthday
- Be able to participate in programming 6 hours a day, Monday through Friday

The following services would NOT be able to be provided in conjunction with Independent Living Skills Training:

- Residential Care
- Group Home or Foster Home Care (unless approved by Wraparound Administration)
- Day Treatment
- Daily Living Skills Training
- Life Skills Training
- Parent Assistance
- Job Coach
- Supported Wk Envir/Job Coach.

Youth who complete the Independent Living Training Program may continue to receive Supported Work Envir/Job Coach Services if additional job training is indicated and the youth is still enrolled in Wraparound.

Credentials:

This service is provided solely through St. Charles Youth and Family Services and all credentialing of service providers is managed by St. Charles with input from Wraparound Milwaukee.

The agency must be on or within 2 blocks of a Milwaukee County bus line. Agency requirements include: use of a standardized curriculum and a furnished "mock" or model apartment that allows youth to practice independent living skills. The furnished model apartment components must include to: a living room; bedroom; bathroom; kitchen with full or apartment size stove, full size refrigerator, and microwave; washer and dryer. The agency must also have onsite job training and as history of connecting youth to permanent jobs in the community. The agency must conduct pre and post tests.
with youth receiving this service and be able to provide outcome information for youth participating in the program. Programming must be offered Monday through Friday (exclusive of holidays) and provide no less than 4.5 hours, up to 6 hours of programming per day.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5111A H0004</td>
<td>100.00</td>
<td></td>
<td>Session</td>
</tr>
</tbody>
</table>

**Individual/Family Therapy Lic. Psycho Behavioral health counseling & therapy, per 15 min**

Goal directed, face-to-face psychotherapeutic intervention provided to an individual and/or family/caregivers. Services may be interactive or insight oriented and are provided by a licensed psychologist with a Ph.D. in an office-based setting.

**Credentials:** State of Wisconsin Psychologist License

The clinician must also satisfactorily complete the Wraparound Milwaukee Practitioner Credentialing process and have a National Provider Identifier (NPI).

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5100A H0004</td>
<td>52</td>
<td></td>
<td>Hour</td>
</tr>
</tbody>
</table>

**Individual/Family Therapy QTT-Office Behavioral health counseling & therapy, per 15 min**

Goal directed, face-to-face psychotherapeutic intervention provided to an individual and/or family/caregivers. Services may be interactive or insight oriented and are provided in an office-based setting.

NOTE: in order for services rendered by the Qualified Treatment Trainee (QTT) to be reimbursable, a QTT with a graduate degree is required to be working toward full licensure.

**Credentials:** Services provided by Qualified Treatment Trainees with a Graduate Degree who are working toward full clinical licensure must meet the following criteria:

- Have a Graduate degree from an accredited institution with course work in psychology, counseling, marriage and family therapy, social work, nursing or a closely related field.
- Have not yet completed the applicable supervised practice requirements described under ch. MPSW 4, 12, 16 or Psy 2, Wis. Admin. Code, as applicable.

Providers of Individual/Family Therapy services must also satisfactorily complete the Wraparound Milwaukee Practitioner credentialing process and have a National Provider Identifier (NPI). It is also required that the QTT Supervisor have been credentialed with Wraparound Milwaukee at time of application.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5100 H0004</td>
<td>16.00</td>
<td></td>
<td>Quarter Hour</td>
</tr>
</tbody>
</table>

**Individual/Family Therapy-Office Behavioral health counseling & therapy**

Goal directed, face-to-face psychotherapeutic intervention provided to an individual and/or family/caregivers. Services may be interactive or insight oriented and are provided in an office-based setting.

**Credentials:** Individual/Family Therapy services can be provided by the following qualified psychotherapists:

1. Wisconsin Licensed Practitioners Practicing Privately or in a Wisconsin Certified Clinic.
   - Licensed Clinical Social Worker
   - Licensed Marriage and Family Therapist
- Licensed Professional Counselor

(2) Music, Art, Dance Therapist with Wisconsin Psychotherapy License

(3) Other Qualified Professionals in a Certified Outpatient Psychotherapy Clinic
- Practitioner with a status Approval (3000 hour) Psychotherapy Letter issued by the Wisconsin Department of Health Services, Division of Quality Assurance (DHS, DQA).

Providers of Individual/Family Therapy services must also satisfactorily complete the Wraparound Milwaukee Practitioner credentialing process and have a National Provider Identifier (NPI).

<table>
<thead>
<tr>
<th>Service</th>
<th>Billing Unit</th>
<th>Rate</th>
<th>Avg IPN Rate</th>
<th>Set IPN Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interpreters 5600</td>
<td></td>
<td>I</td>
<td></td>
<td></td>
</tr>
<tr>
<td>T1013</td>
<td></td>
<td>40.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Interpretive services provided to the child/family - may be bi-lingual, hearing impaired, or other.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Credentials:**
Two agency letters of reference.

| Job Internship 5556 | | | | |
| Supported employment, per 15 min S2023 | | 5.75 | | |
| | This service provides a job internship for qualified youth and family members to prepare for future employment. An internship is an opportunity for employers to assess work skills and behaviors of prospective client-employees. On-the-job paid work experience will prepare the intern for employment within or outside of the company in which the internship is being completed. As a result of the internship, the agency will provide an evaluation of the intern, which may include identification of the type of job best suited for the client, assessment of the intern’s attendance and work performance, and ability of the intern to accept constructive feedback. The intern will participate in the program for up to 40 hours. The 40 hours typically will not be completed in one week. The duration of the internships may vary, but will not exceed three months. Internal auditing procedures will include verification of hours worked via time sheets maintained by the agency. A detailed plan as to how the service will be delivered must be included in the application. This service is provided by one agency in the Integrated Provider Network. | | | | |
### Kinship Care

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kinship Care</td>
<td>7.35</td>
<td>Daily</td>
</tr>
</tbody>
</table>

Foster care, non-therapeutic, per diem

Close relative providing alternative living situation for children who cannot reside in their parental home. The placement provides a structured, nurturing environment with a daily living routine and supervision. Application must be made with the Bureau of Child Welfare before Kinship funds are authorized by Wraparound. The Bureau of Child Welfare will perform the necessary investigative work and make the final determination of the family's eligibility for ongoing Kinship Care payments.

### Life Skills Training - Group

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>H2014</td>
<td>16.00</td>
<td>Hour</td>
</tr>
</tbody>
</table>

Skills training & development, per 15 min

Life Skills Training Group provides support and training services for youth ages 14-18 a group setting of up to 6 clients with 1 staff member or up to 10 clients with 2 staff members. This service is designed to assist youth in acquiring the skills needed to support an independent lifestyle and promote an improved sense of self-worth. Life skills training is designed to assist youth with setting and achieving goals, learning independent living skills, demonstrating accountabilities and making goal directed decisions related to independent living, educational/vocational training and employment.

Agencies are to establish an initial baseline regarding the client’s skill and knowledge base related to the life skills training areas identified below. This may be accomplished through the use of a standardized assessment and client observation and is to be documented in the client record.

In addition to goal setting activities, training in the following areas it to be provided based on the client’s skills, needs and interests.

1. Money management and budgeting
   - Opening and managing bank accounts (savings/checking accounts); balancing a checking account.
   - Pro’s and con’s of charge cards.
   - How interest is calculated for saving accounts. Interest payments on loans and charge accounts.
   - Sales tax (taxable vs non-taxable commodities).
   - Income taxes (need to file/help with).
2. Recognizing a bargain / comparison-shopping.
3. Skills related to living independently.
   - Setting up a household
   - Finding a place to live.
   - Signing a lease.
   - Setting up: telephone, electric, gas service.
<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Changing your mailing address.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Use of public transportation.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. How to find a vocational training program (including finding financial assistance).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. General information related to looking for a job, including filling out a job application, understanding paycheck withholdings, etc.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Not to duplicate Service Code 5560 Supported Wk Envir/Job Coach.)</td>
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<td></td>
<td></td>
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<tr>
<td>7. Obtaining medical care, choosing a doctor or dentist.</td>
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<td></td>
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</tr>
<tr>
<td>8. Basic information about caring for a pet (nutrition, proper discipline, veterinary services).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Developing hobbies and leisure interests.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Conflict resolution training.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Use of community resources - emergency and non-emergency (food pantries, shelters, medical, financial).</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Skills training & development**

**Credentials:** Requires minimum of High School diploma or equivalent with at least 2 years (full-time) experience in working with children or adults in an education, childcare or health care setting providing direct client services/care. Supervision/oversight to be provided by individual with a bachelor’s degree (or above) in human services or education. Supervision can be demonstrated in routinely conducted review meetings (documented at least monthly) or co-signing of documentation related to client participation in programming. Agency providers with bachelor’s degree or above are not required to have additional oversight.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>5563B Life Skills Training - Individual</td>
<td>32.00</td>
<td></td>
</tr>
<tr>
<td>H2014 Skills training &amp; development, per 15 min</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Life Skills Training Individual provides support and training services for youth ages 14-18 on an individual (1:1) basis. This service is designed to assist youth in acquiring the skills needed to support an independent lifestyle and promote an improved sense of self-worth. Life skills training is designed to assist youth with setting and achieving goals, learning independent living skills, demonstrating accountabilities and making goal directed decisions related to independent living, educational/vocational training and employment.

Agencies are to establish an initial baseline regarding the client’s skill and knowledge base related to the Life Skills Training areas identified below. This may be accomplished through the use of a standardized assessment and client observation and is to be documented in the client record.
In addition to goal setting activities, training in the following areas is to be provided based on the client’s skills, needs and interests.

1. Money management and budgeting
   Opening and managing bank accounts (savings/checking accounts); balancing a checking account.
   Pro’s and con’s of charge cards.
   How interest is calculated for saving accounts. Interest payments on loans and charge accounts.
   Sales tax (taxable vs non-taxable commodities).
   Income taxes (need to file/help with).
2. Recognizing a bargain / comparison-shopping.
3. Skills related to living independently.
   Setting up a household
   Finding a place to live.
   Signing a lease.
   Setting up: telephone, electric, gas service.
   Changing your mailing address.
4. Use of public transportation.
5. How to find a vocational training program (including finding financial assistance).
6. General information related to looking for a job, including filling out a job application, understanding paycheck withholdings, etc.
   (Not to duplicate Service Code 5560 Supported Wk Envir/Job Coach.)
7. Obtaining medical care, choosing a doctor or dentist.
8. Basic information about caring for a pet (nutrition, proper discipline, veterinary services).
10. Developing hobbies and leisure interests.
11. Conflict resolution training.
12. Use of community resources - emergency and non-emergency (food pantries, shelters, medical, financial).

Providers of Life Skills Training are encouraged to develop a certificate or awards component as an incentive to clients who successfully complete the training.

This service requires a core curriculum outlining the specific course study, which must be on file with and pre-approved by the Wraparound Milwaukee Provider Network.
### Mentoring

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5524 H2021</td>
<td>22.00</td>
<td></td>
<td>Hour</td>
</tr>
<tr>
<td>Mentoring</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community-based wrap services, per 15 min</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A mentor is a person engaged to develop a one-on-one relationship and function as both a positive role model and advocate for a child or adolescent in his/her family system. Children should be matched with mentors based on their strengths, needs and interests. A mentor could be involved in a variety of activities with a child, with the focus including recreation, special school projects, social skills and peer relationship building, personal care/hygiene/exercise, etc. Direction, consultation and support are be provided by the Care Coordinator/Safety Service Manager. The time commitment would vary dependent upon the child’s needs and program requirements.

### Community-based wrap services

**Credentials:**

A minimum of 15 hours of training is required of all staff prior to service. A 15-hour training curriculum must be submitted for approval by the IPN as part of the application process. Owners must show evidence of training/certification/education specific to mentoring in the application process. A copy of the mentor's training certificate verifying this training must be submitted to the Provider Network upon the agency's request to add the mentor into Synthesis. A copy of the mentor's training certificate must be kept in his/her employee file.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5575 T2003</td>
<td>1.00 per mi</td>
<td></td>
<td>Dollar</td>
</tr>
<tr>
<td>Mileage Adjustment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non emerg transport, per trip</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

This service code is used in conjunction with Service Codes 5572 and 5574 - Out of County Transportation - to pay for the per-mile portion of the trip charge.

### Occupational Therapy

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5135 97533</td>
<td>20.00</td>
<td></td>
<td>Quarter Hour</td>
</tr>
<tr>
<td>Occupational Therapy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sensory integration therapy</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Occupational Therapy services must be medically necessary and related to an identified need(s) on the youth’s plan of care. Occupational Therapy services are designed to:

- Meet functional needs associated with serious emotional disturbance experienced by the enrolled youth
- Help achieve a specific goal(s) for the enrolled youth where there is a reasonable expectation of achieving measurable improvement in a reasonable and predictable period of time
- Address the enrolled youth’s sensory integration needs

Services are delivered by an Occupational Therapist licensed by the State of Wisconsin.

Occupational Therapy services include: assessment of the enrolled youth’s abilities to engage in age appropriate activity and respond appropriately to environmental conditions.
Service | Name / ID | Set IPN Rate | Avg IPN Rate | Billing Unit
--- | --- | --- | --- | ---

events. The Occupational Therapy intervention includes treatment services that focus on the youth behavioral and mental health related needs in the areas of sensory integration, interpersonal and cognitive skill development; youth and parent education regarding management of the youth’s needs; collaboration with parents, teachers and other members of the child and family team.

Services are generally provided in a clinic setting. Limited home based services for the purpose of assessment and family education may be reimbursed under this code. (Travel time is not reimbursable.)

**Credentials:**
State of Wisconsin Occupational Therapist License
National Provider Identifier

**DOCUMENTATION REQUIREMENTS:**
Occupational Therapy must be provided in accordance with a written treatment plan which is updated monthly or more often as needed.

The enrolled youth’s needs are to be re-evaluated on an ongoing basis, and documentation must address progress made toward identified treatment goals.

The treatment goals and documentation of treatment results should specifically demonstrate that occupational therapy services are contributing to improvement in the enrolled youth’s behavioral or mental health functioning at home, in the community or at school.

**CONTINUED AUTHORIZATION:**
Authorization for services is managed on a month to month basis with services provided on average 1 to 3 hours per week. Requests for continued service authorization are to be based on progress made toward the enrolled youth’s identified treatment goals. A one month transition period is appropriate when maximum benefit from the service has been achieved.

The therapist is responsible for forwarding monthly progress reports to the Care Coordinator for inclusion in the Child and Family Team review process.

| 5591 | On The Job Training | 1000 | 1000 | Total |
| H2014 | Skill training and development, per 15 min | | | |

On the Job Training provides an opportunity for youth and family members to prepare for future employment through hands-on learning of hard and soft skills in a realistic, paid work environment.

Service Components: On the Job Training (OJT) is a structured, time limited (30-120 days) service, which incorporates on the job evaluation, hard and soft skill training, and paid work experience performing meaningful (not contrived tasks or other “make work” activities) tasks. OJT is fundamentally work-oriented, but shall include formal and informal hard and soft skill training, as well as assessment. OJT may occur on or off site of the Provider and trainees shall be paid at minimum wage or higher and will be subject to all required payroll deductions. OJT shall build a credible work history by realistically reflecting the demands of regular, competitive employment, but will
include intensive, structured supervision and feedback, with some accommodation for learning and trial and error. At monthly intervals, an evaluation of work performance will occur in Synthesis, to include a summary of:

1. Service Recipient hours scheduled, worked, and nature of work performed.
2. The Service Recipient’s reaction to the work environment and the overall experience.
3. Observations by the employer of the Service Recipient’s performance and interaction with other employees and the work environment.

On the Job Training will occur as follows:
On the Job Training—a combination of enrollee-paid work and classroom based hard and soft skill training to take place for a pre-approved period of time (30-120 days), rate, and schedule (number of hours). For enrollees who successfully complete this phase, a letter of recommendation must be obtained from the work site (not from an agency affiliated person, unless agency is OJT site). Service may conclude at this point.

If Provider facilitates employment of service recipient into a permanent position in a field related to training, provider shall receive an outcome-based payment of $700 (conditions and reporting requirements follow Phase 3 of service code 5557, Employment Preparation and Placement) upon achieving the 60 day job retention milestone. Permanent employment at OJT site will qualify for the retention bonus, but time spent in OJT will not count toward the 60 day timeline.

The following services may not be provided concurrently with OJT:
- Employment Preparation and Placement (EPP)
- Independent Living Skills Training
- Life Skills Training, Individual and/or Group

Outcome: Service Recipients increase hard and soft skills. Service Recipients establish a positive, verifiable work reference. Service Recipients identify interests, abilities, limitations, and areas for improvement as they relate to their job search and career development.

Credentials:
Agency:
During the application process, applicants must show evidence of training/experience/education specific to the provision of this service. This service requires a pre-approved curriculum which must be on file with and pre-approved by the Wraparound Milwaukee Provider Network, outlining:

1. A copy of assessment materials
2. The specific course of study
3. Timelines: week 1, week 2, etc.
4. Scheduled number of hours per week and total for work, class/training, and face-to-face contact with Provider
5. Specific hard (technical and job specific, i.e. keyboarding) and soft skills (generic and universal: i.e. communication) to be developed, and how they will be evaluated, to include copies of any pre/post testing, etc.
6. Cost per participant
7. Expectations and participation requirements for the program, including participant conduct that could result in expulsion from the program.

Provider:
Individual Providers of this service must possess a High School Diploma or GED and must have at minimum three years work force experience and at least one year experience in related field. Individual Direct Service Providers of this service shall be pre-approved by Wraparound and must comply with Policy #057, “Caregiver Background Checks”.

Reporting and Documentation Requirements:
Synthesis: Monthly summary of activities engaged in, including:
1. Hours scheduled/attended,
2. Hours scheduled attended class/training time
3. Dates and times of all face to face contact with Provider.
4. Feedback from job supervisor
5. For service recipients hired into permanent jobs, Synthesis reports documenting
   a) Employment verification/start of employment
   b) Employment retention

Rate: Program summary and rate to be approved by Wraparound prior to the start of services. Rate will be prorated for partial completion of Phase 1.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5522 S5110 Parent Assistance</td>
<td>30.00</td>
<td></td>
<td>Hour</td>
</tr>
</tbody>
</table>

Provider Assistance: A service to help the client/parent/caregiver acquire parenting skills and/or organize their household to be a clean, safe environment. The parent assistant teaches, models, and monitors appropriate child-rearing strategies and techniques and household management skills. Provides information on child development, age appropriate behavior and parental expectations, and childcare activities. Involves assisting the child and family with securing basic resources such as food, clothing, medicine, access to support groups, etc. Provides training and assistance with routine household tasks and household management techniques related to the caregiver acquiring the skills and competencies necessary to become self-sufficient. This service should be structured to meet identified needs/goals within 90 days.

Home care training, family, per 15 min

Credentials:
High School diploma or G.E.D. and a minimum of 15 hours of training prior to service delivery. A copy of the training certificate from the agency verifying this training is to be submitted to the Integrated Provider Network and a copy maintained in the agency employee file.

Agencies must submit their training curriculum outlining the 15 hours of training for approval before they can provide this service. Applicants must show evidence of training/certification/education specific to parent assistance in the application process. Agencies must submit proof of training (e.g.
training certificate) for each prospective parent assistant prior to approval in Synthesis and service provision.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Billing Unit</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent Correctional Facility Visit.</td>
<td>Trip</td>
<td>250</td>
<td></td>
</tr>
</tbody>
</table>

This service is designed to allow Wraparound Milwaukee enrolled youth to visit a parent who is currently incarcerated in a Wisconsin prison or correctional facility outside of the Milwaukee Area. Visits to be held in the correctional facility general visiting or designated areas. Does not include visits to parents who are in segregation.

Correctional facilities/institutions visited differ by Provider Agency.

Integrity Family Services provides services to:
- Waupun Correctional Institution
- Dodge (Waupun) Correctional Institution
- John Burke (Waupun) Correctional Institution
- Fox Lake (Waupun) Correctional Institution
- Green Bay Correctional Institute
- Taycheedah Correctional Institution
- Robert E. Ellsworth Correctional Institution
- Racine Correctional Institution

St. Rose Youth and Family Center provides services to:
- John Burke (Waupun) Correctional Institution
- Taycheedah Correctional Institution
- Robert E. Ellsworth Correctional Institution
- Racine Correctional Institution
- Southern Oaks Girls School

The service includes transportation of the Wraparound enrolled youth to and from the correctional facility and supervision of the youth during the entire time of the visit with their parent.

Credentials: Staff with prior experience working with Wraparound youth desired.

Prior experience as a Crisis Stabilization provider for Wraparound Milwaukee or equivalent training.

Valid Wisconsin Drivers License (Drivers Abstract on file with agency)

Agencies must obtain 2 letters of reference regarding the provider’s professional abilities. Reference letters are to be maintained in the employees file at the agency.

Crisis training of 40 hours for staff with no prior crisis stabilization related experience or 20 hours for staff with 6 months of prior experience. Training must be completed prior to the provision of this service.
Training can include Crisis Prevention Intervention (CPI), Managing Aggressive Behavior (MAB) or a similar program along with other related in-service training; crisis intervention and de-escalation training in the following areas:
- Crisis regulations.
- Wraparound crisis intervention policies and procedures and
- Specific requirements associated with this service.
- Wisconsin state statutes and administrative rules related to patient rights and confidentiality of youth records.
- Basic mental health intervention techniques applicable to crisis situations.
- Techniques for assessing and responding to persons with emergency mental health needs who are experience a crisis or AODA related problems.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sole Provider: Integrity Family Services</td>
<td>50</td>
<td>Trip</td>
</tr>
</tbody>
</table>

Use this service code to authorize payment for one adult escort (who is on incarcerated parent’s approved visitation list) who accompanies a Wraparound enrolled youth PARENT CORRECTIONAL FACILITY VISITATION - Service Code 5550A.

This code may only be authorized in conjunction with PARENT CORRECTIONAL FACILITY VISITATION - Service Code 5550A.

**Credentials:**

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sole Provider: St. Rose Youth and Family Center</td>
<td>70</td>
<td>Session</td>
</tr>
</tbody>
</table>

Use this service code to authorize payment for a ONE TIME ORIENTATION SESSION conducted with the youth referred for PARENT CORRECTIONAL FACILITY VISITATION - Service Code 5550A.

This code may only be authorized in conjunction with PARENT CORRECTIONAL FACILITY VISITATION - Service Code 5550A.

**Credentials:**

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<thead>
<tr>
<th>Service Name / ID</th>
<th>Rate</th>
<th>Billing Unit</th>
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</thead>
<tbody>
<tr>
<td>The purpose of the Placement Stabilization Center is to provide short-term placement for adolescents, ages 12-17, under a CHIPS order, who require temporary placement while steps for stabilizing placements are being explored. Placement stabilization centers are eight-bed group homes selected by and under contract to the Bureau of Milwaukee Child Welfare. They provide a safe and nurturing living environment in which adolescents can be stabilized, monitored and assessed for the most appropriate placement for permanency of the adolescents. Services provided include emotional, behavioral and social assessments of the child’s functioning in a group setting,</td>
<td>162.00</td>
<td>Daily</td>
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</tbody>
</table>
day-to-day structured programming, providing necessary transportation to medical appointments, evaluations and to school and to facilitate visitation between the adolescent and family.

**Credentials:** All such placements must be approved and coordinated through the liaison for Lutheran Social Services, First Choice for Children (phone number 325-3175).

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Billing Unit</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
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</thead>
<tbody>
<tr>
<td>5221 H0046</td>
<td></td>
<td>100.00</td>
<td>Hour</td>
</tr>
<tr>
<td>Professional Consultation Mental Health service, NOS</td>
<td>This service is authorized on a case by case bases upon the recommendation of a member of the Wraparound Management Team. A licensed Psychologist or Child Psychiatrist, considered to be an &quot;expert&quot; in their field, provides case consultation related to the treatment of a youth with complex diagnoses involving a developmental and/or a cognitive disorder. The practitioner (not currently providing services to the enrollee/family) provides a “one time” consultation designed to offer guidance, education and recommendations to care coordinators and/or a Child and Family Team in situations where they are experiencing extreme difficulty identifying an appropriate course of intervention for a designed youth and their family.</td>
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<tr>
<td>5355 99285</td>
<td></td>
<td>255.00</td>
<td>Session</td>
</tr>
<tr>
<td>Psych Hosp-ER Visit Behavioral health screening to determine adm</td>
<td>Triage assessment in a psychiatric hospital setting to assess need for inpatient hospitalization. ER visit rate paid only on clients NOT admitted to the ospital -- if a client is hospitalized, this fee is covered as part of the first day of hospitalization.</td>
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<tr>
<td>5350 99223</td>
<td></td>
<td>800.00</td>
<td>Daily</td>
</tr>
<tr>
<td>Psychiatric Hospital Hospital Care, per day</td>
<td>Placement in an inpatient psychiatric hospital for assessment and treatment of children with severe emotional and mental health problems. These are children who are determined to be dangerous to themselves or others due to a mental illness and require hospitalization as the least restrictive alternative. Hospitalization should be short-term with the goal of returning the child to a home or community placement as soon as possible. This service must be pre-authorized by the Mobile Urgent Treatment Team for Wraparound youth.</td>
<td></td>
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<tr>
<td>5050 90862</td>
<td></td>
<td>80.00</td>
<td>Session</td>
</tr>
<tr>
<td>Psychiatric Review/Meds Pharmacologic mgmt</td>
<td>Prescription monitoring and evaluation of medication on an outpatient basis by a licensed Psychiatrist. These sessions are usually brief reviews and medication monitoring (with no more than minimal psychotherapy, generally 15 to 30 minutes).</td>
<td></td>
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</tbody>
</table>

**Credentials:** Licensed M.D. with a specialty in Psychiatry/Child Psychiatry

Page 63 of 97
Effective 1/1/2007, providers of this service must have a National Provider Identifier (NPI)

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5051 90862</td>
<td>150.00</td>
<td></td>
<td>Session</td>
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<tr>
<td>90805,9 0807,90 811,908 13</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Psychiatric Review/Meds-with Therapy</strong></td>
<td><strong>150.00</strong></td>
<td><strong>90862</strong></td>
<td><strong>Session</strong></td>
</tr>
<tr>
<td><strong>Pharmacologic mgmt</strong></td>
<td><strong>150.00</strong></td>
<td><strong>90862</strong></td>
<td><strong>Session</strong></td>
</tr>
<tr>
<td>Prescription monitoring on an outpatient basis by a licensed Psychiatrist, including medical evaluation and medication management services, with interactive, insight-oriented or supportive psychotherapy (generally 30 minutes or more).</td>
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</tbody>
</table>

**Credentials:** Licensed M.D. with a speciality in Psychiatry/Child Psychiatry

**Effective 1/1/2007, providers of this service must have a National Provider Identifier (NPI)**

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
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</thead>
<tbody>
<tr>
<td>5180B 96101</td>
<td>1.00</td>
<td></td>
<td>Dollar</td>
</tr>
<tr>
<td><strong>Psychological Eval. Extended-Ph.D. Psychological testing</strong></td>
<td><strong>1.00</strong></td>
<td><strong>96101</strong></td>
<td><strong>Dollar</strong></td>
</tr>
<tr>
<td>Used in conjunction with 5180A, Evaluation Services, Ph.D. If a psychological evaluation will be of a more extensive nature than is customary, the case manager and provider may request an enhanced rate be paid for the evaluation, but this service must be prior authorized by the Director of the Mobile Urgent Treatment Team (Wraparound Chief Psychologist). A psychological report on the specific findings must be submitted to the care coordinator within 30 days of the appointment.</td>
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</tbody>
</table>

**Credentials:** Wisconsin Psychologist License.

**Effective 1/1/2007, providers of this service must have a National Provider Identifier (NPI)**

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
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</thead>
<tbody>
<tr>
<td>5180A 96101</td>
<td>400.00</td>
<td></td>
<td>Evaluation</td>
</tr>
<tr>
<td><strong>Psychological Evaluation Services-Ph.I Psychological testing</strong></td>
<td><strong>400.00</strong></td>
<td><strong>96101</strong></td>
<td><strong>Evaluation</strong></td>
</tr>
<tr>
<td>Performed by a licensed psychologist. Requires a written report, including a DSM-IV diagnosis addressing all five axis and specific treatment recommendations. A psychological report of specific findings must be submitted to the Care Coordinator within 30 days of the appointment.</td>
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</tbody>
</table>

**Credentials:** Wisconsin Psychologist License.

**Effective 1/1/2007, providers of this service must have a National Provider Identifier (NPI)**

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
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</thead>
<tbody>
<tr>
<td>5526 H2022</td>
<td>60.00</td>
<td></td>
<td>Daily</td>
</tr>
<tr>
<td><strong>Recreation Programming-Full Day Community-based wrap services, per diem</strong></td>
<td><strong>60.00</strong></td>
<td><strong>H2022</strong></td>
<td><strong>Daily</strong></td>
</tr>
<tr>
<td>These are programs that offer supervision and structure for youth. Programs must include planned social and recreational activities. This service is used when school is not in session, and can only be provided in an agency setting. A minimum of 6 hours and up to 9 hours per day of service may be provided. The agency rate must be</td>
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</table>

Page 64 of 97
<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
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<tbody>
<tr>
<td>identified at the time of application.</td>
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NOTE: Transportation may NOT be use in conjunction with RECREATION PROGRAMS. Transportation to Recreation Programming is to be provided by the agency providing the recreation program or by the child’s family.

Community-based wraparound service

**Credentials:**
A Day Care Certification or Day Care License is required if serving four to eight children under the age of seven or eight or more children to age 12.

The program supervisor must be at least 21 years of age and have at least 1 year of experience working with children and have completed at least 24 hours of training. Training may include: early childhood training, child/human growth and development, early childhood education, first aid training, training in cardiopulmonary resuscitation, recognition of and reporting of childhood abuse and neglect, orientation to agency policies and procedures. Training may be documented via: attendance sheets, certificates of attendance or diplomas and is to be keep on file by the agency. Prior training in any of the above areas is acceptable with the appropriate supporting documentation.

Provider Agency employees providing recreation programming must be: at least 18 years of age, have a valid driver's license and have at least one year of driving experience. Agency employees must complete 24 hours of training as described above within 6 months of employment. Prior training in any of the above areas is acceptable with the appropriate supporting documentation.

The agency rate is to be identified at the time of application.

Individual agency rates will be approved based on components provided in conjunction with the program (i.e. number of hours per day the program operates; number of meals/snacks provided; frequency of outings; inclusion of transportation, etc.).

A program description is to be included in the application process.

<table>
<thead>
<tr>
<th>5527 H2022</th>
<th>Recreation Programming-Half Day service</th>
<th>35.00</th>
<th>Daily</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community-based wrap around service</td>
<td>These are programs that offer supervision and structure for youth. Programs must include planned social-recreational activities. This service is used when school is not in session, and can only be provided in an agency setting. A minimum of 4 hours and up to 6 hours per day of service may be provided. <strong>NOTE:</strong> Transportation may NOT be use in conjunction with RECREATION PROGRAMS. Transportation to Recreation Programming is to be provided by the agency providing the recreation program or by the child’s family.</td>
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</table>

<table>
<thead>
<tr>
<th>5527 H2022</th>
<th>Recreation Programming-Half Day service</th>
<th>35.00</th>
<th>Daily</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community-based wrap around service</td>
<td>These are programs that offer supervision and structure for youth. Programs must include planned social-recreational activities. This service is used when school is not in session, and can only be provided in an agency setting. A minimum of 4 hours and up to 6 hours per day of service may be provided. <strong>NOTE:</strong> Transportation may NOT be use in conjunction with RECREATION PROGRAMS. Transportation to Recreation Programming is to be provided by the agency providing the recreation program or by the child’s family.</td>
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</tbody>
</table>

A program description is to be included in the application process.
hours of training. Training may include: early childhood training, child/human growth and development, early childhood education, first aid training, training in cardiopulmonary resuscitation, recognition of and reporting of childhood abuse and neglect, orientation to agency policies and procedures. Training may be documented via: attendance sheets, certificates of attendance or diplomas and is to be keep on file by the agency. Prior training in any of the above areas is acceptable with the appropriate supporting documentation.

Provider Agency employees providing recreation programming must be: at least 18 years of age, have a valid driver's license and have at least one year of driving experience. Agency employees must complete 24 hours of training as described above within 6 months of employment. Prior training in any of the above areas is acceptable with the appropriate supporting documentation.

The agency rate is to be identified at the time of application. Individual agency rates will be approved based on components provided in conjunction with the program (i.e. number of hours per day the program operates; number of meals/snacks provided; frequency of outings; inclusion of transportation, etc.).

A program description is to be included in the application process.

### Residential Care Center for Children & Youth
- **Daily**
- **5340 T2048** Residential Care Center for Children & Behavioral health, long term residential
  - Placement in a licensed Residential Care Center for children with severe emotional, behavioral or mental health problems. Placements may be made for 30 days or less with a goal of crisis stabilization and/or evaluation/assessment before returning home or to a foster parent. Placements may be made for longer periods over 30 days when a child needs more intensive supervision or treatment. As of 1/1/99, all residential care placements must be pre-authorized by Wraparound; pre-authorization periods vary, but may be no longer than 90 days. All residential care placements must be reviewed at least every 90 days. (Refer to Wraparound Policy #004.)
  - **Credentials:** Residential Care License
  - **Set IPN Rate:** $261.83
  - **Avg IPN Rate:** $261.83
  - **Billing Unit:** Daily

### Residential Care-Specialized
- **Daily**
- **5345 T2048** Residential Care-Specialized Behavioral health, long term residential
  - Short-term (up to 90 days), highly specialized and intensive program (i.e. developmentally disabled child with severe behavior challenges requiring one-on-one intervention; a SED child with severe, high risk or harmful behaviors requiring close staff supervision and monitoring). This service must be prior authorized. (Refer to Wraparound Policy #004.)
  - **Credentials:** Residential Care License
  - **Set IPN Rate:** $288.31
  - **Avg IPN Rate:** $288.31
  - **Billing Unit:** Daily

### Residential Care-Type II
- **Daily**
- **5346 T2048** Residential Care-Type II Behavioral health, long term residential
  - A residential treatment facility certified to accept delinquent youth per Wisconsin State Statute 938.34 (4d). This service needs to be prior-authorized. (Refer to Wraparound Policy #004.)
  - **Credentials:** Residential Care License
  - **Set IPN Rate:** $180.00
  - **Avg IPN Rate:** $180.00
  - **Billing Unit:** Daily

### Residential Rate Adjustment
- **Dollar**
- **5339 T2033** Residential Rate Adjustment Residential care, NOS
  - This service code will be utilized when paying residential facilities their 8% rate
  - **Set IPN Rate:** $5339.00
  - **Avg IPN Rate:** $9.01
  - **Billing Unit:** Dollar
<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Credentials:</strong></td>
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</tr>
<tr>
<td>5339A T2033</td>
<td></td>
<td></td>
<td>Dollar</td>
</tr>
<tr>
<td>Residential Rate Adjustment, Prior Year</td>
<td>This service code will be utilized when paying residential facilities their 8% rate adjustment based on crisis billing submitted. This service code will be used anytime a payment needs to be posted to a prior calendar year AFTER MARCH 31ST of the current year (i.e., if a 2006 payment needs to be posted after 3/31/07). The service recipient field will be used to enter the client's name (if appropriate), and the provider field will be used to code in the specific service code.</td>
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<td><strong>Credentials:</strong></td>
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<tr>
<td>5344 T2033</td>
<td>175.00</td>
<td>Daily</td>
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<tr>
<td>Residential Short-Term Stabilization</td>
<td>A specialized short-term residential care center or like facility designed to assess, stabilize and link a child to formal and informal resources to facilitate a child’s placement in or return to a community placement. Length of stay may range from 15 to 60 days. (Stays less than 15 days would be considered Respite Residential (service code 5412.) These resources work in partnership with the child and family teams to identify needed community services and work with the child's family, foster parent or other caretakers to alleviate the conditions preventing the child’s successful placement in the community. These facilities usually provide clinically supervised treatment services, transportation, recreation, but may not provide all the services of a regular residential care center. This service must be prior authorized. (Refer to Wraparound Policy #004.)</td>
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<tr>
<td><strong>Credentials:</strong></td>
<td>Residential Care License</td>
<td></td>
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</tr>
<tr>
<td>5413 S5151</td>
<td>50.00</td>
<td>Daily</td>
<td></td>
</tr>
<tr>
<td>Respite, Daily</td>
<td>The daily rate applies to children in respite during the day, with a minimum of four hours. Daily respite must not be used for overnight service. This service is limited to Children's Service Society.</td>
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<tr>
<td><strong>Credentials:</strong></td>
<td>Child Placing Agency Licence and Foster Care License for the direct service provider.</td>
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<tr>
<td>5411 H0045</td>
<td>75.00</td>
<td>Daily</td>
<td></td>
</tr>
<tr>
<td>Respite, Foster care</td>
<td>Overnight or short-term care (14-30 days) in a licensed foster home. The Foster Home or Treatment Foster Home licensing agency must approve this placement. Respite may not be used as a placement option if the child has no placement. Respite should be regularly scheduled as determined by the Child and Family Team and reflected in</td>
<td></td>
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</table>

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the Plan of Care or Treatment Plan. Respite for an emergency should be documented in the Crisis Plan in the Plan of Care or Treatment Plan.

Care Coordinators or Case Managers placing children must make sure there is an up-to-date Foster Care License, have written consent by the parent/legal guardian, and change of placement. Care Coordinators and Case Managers must monitor this placement and coordinate child’s return to their home.

**Credentials:** Foster Care License or Child Placing Agency License

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
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</thead>
<tbody>
<tr>
<td>5410 S5150</td>
<td>10.00</td>
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<td>Hour</td>
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<tr>
<td>Respite, Hourly</td>
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<tr>
<td>Respite care</td>
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<td>care, non-hospice</td>
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<tr>
<td>Temporary care,</td>
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<td>not to exceed</td>
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<td>eight hours per</td>
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<td>day, required to</td>
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<td>caregiver of</td>
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<td>the stress in</td>
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<td>other reasons</td>
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<td>that help sustain</td>
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<td>the family</td>
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<td>structure or</td>
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<td>meet the needs</td>
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<td>of the child.</td>
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<tr>
<td>Hourly respite</td>
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<tr>
<td>should be a</td>
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<td>regularly</td>
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<td>scheduled need</td>
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<td>as determined by</td>
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<td>the Child and</td>
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<td>Family Team and</td>
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<td>reflected in the</td>
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<tr>
<td>Plan of Care or</td>
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<tr>
<td>Treatment Plan.</td>
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<tr>
<td>Hourly respite</td>
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<tr>
<td>for an emergency</td>
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<td>should also be</td>
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<td>documented in</td>
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<td>the crisis plan</td>
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<td>in the Plan of</td>
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<td>Care or Treatment</td>
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<td>Plan.</td>
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<td>Hourly respite</td>
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<td>may be provided</td>
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<td>in the child’s</td>
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<td>home, respite</td>
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<td>provider’s home,</td>
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<td>or in an agency</td>
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<td>setting by a</td>
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<tr>
<td>qualified provider. The parent/legal guardian must provide signed consent for hourly respite.</td>
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<th>Service Name / ID</th>
<th>Set IPN Rate</th>
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<tr>
<td>T1005</td>
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<tr>
<td>Respite care svcs</td>
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<td>up to 15 min</td>
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**Credentials:** A Family Day Care License is required if serving four or more youth for less than 24 hours per day. A Group Day Care License is required if serving nine or more youth for less than 24 hours per day (DH&FS, Chapter HFS 45 and HFS 46).

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
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<tbody>
<tr>
<td>5412 H0045</td>
<td>105.00</td>
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<td>Daily</td>
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<tr>
<td>Respite, Residential</td>
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<tr>
<td>Respite care</td>
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<td>services, not in</td>
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<tr>
<td>the home</td>
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<tr>
<td>Overnight respite</td>
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<tr>
<td>care in a licensed</td>
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<tr>
<td>residential care</td>
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<tr>
<td>center for children and youth shall not exceed 9 days per episode. If there is a need for an extension, care managers must contact their Wraparound Liaison.</td>
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**Credentials:** Child Placing Agency License or Residential Care License

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<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
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<tbody>
<tr>
<td>5415 H0045</td>
<td>205</td>
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<td>Daily</td>
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<tr>
<td>Respite-Crisis-FOCUS</td>
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<tr>
<td>Respite care</td>
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<tr>
<td>not in the home, per day</td>
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<tr>
<td>Overnight respite</td>
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<tr>
<td>care in a licensed</td>
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<tr>
<td>residential care</td>
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<tr>
<td>center for children and youth shall not exceed 9 days per episode. If there is a need for an extension, care managers must contact their Wraparound Liaison. Service includes youth in a crisis. Only for the FOCUS Program.</td>
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</table>

**Credentials:** Child Placing Agency License or Residential Care License

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<tr>
<td>5270 T2003</td>
<td>55.00</td>
<td>55.00</td>
<td>Daily</td>
</tr>
<tr>
<td>School Accountability Program</td>
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<tr>
<td>Non emerg transport, per trip</td>
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<tr>
<td>The sole provider of School Accountability is Integrity Family Service. This service</td>
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</table>
provides supervised transportation for youth being transported daily to Norris School following release from the Norris Residential Program. The Wraparound Milwaukee Program Director must approve this service prior to the service being provided. Youth are transported to and from Norris School weekdays by a Crisis Intervention training staff from Integrity Family Services for the duration of the Wraparound Administration authorization. Integrity is limited to one trip in the morning and one trip in the afternoon to transport youth to the Norris School program. Other trips are the responsibility of the youth's Child and Family Team.

Integrity staff will
- Pick the youth up from their current residence (the care coordinator is responsible for notifying Integrity staff of the youth's current residence).
- Provide transportation and supervision for each youth during transport to Norris School (W247 S10395 Center Drive, Mukwonago, WI)
- Return the youth each day to their current residence.

Note: Transportation pick-up and drop-off address must be the same address each day.

Agency to maintain daily log indicating to and from trips and client compliance.

Credentials: Valid Wisconsin Driver's license.
Copy of an acceptable driver's abstract on file with Integrity Human Resource Dept.
Insurance coverage per Wraparound Milwaukee Fee-for-Service Agreement at the time the service is provided.
Crisis Intervention training.

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<tr>
<th>Service Name / ID</th>
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<th>Avg IPN Rate</th>
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<tbody>
<tr>
<td>School/Community Based Mental Health Services is only allowing this service at Audobon Middle and High School, Wedgewood Park Middle School, Oliver Wendell Holmes K-8 School and Hopkins Lloyd Community K-8 School. School/Community Based Mental Health Services is a therapeutically based intervention which incorporates individual/family therapy and school linkages with a goal of improving school and family functioning for youth with serious emotional, behavioral, and mental health needs. Services are provided primarily in the school, but may also occur in the client’s home, an inpatient clinic (for services when school is not in session), or in rare instances a community-based setting (i.e. when a neutral location is required). Youth served may be at imminent risk of out-of-home placement including a Residential Care Center or a psychiatric hospital, or require this service as an alternative to continued placement in one of those settings. In addition, youth served may be at imminent risk of suspension or expulsion from school, at risk of being removed from a mainstream classroom setting, already removed from a mainstream classroom setting, or require this service as an alternative to continued seclusion from normalized school settings. All services provided must be directly or indirectly related to the client’s emotional/</td>
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behavioral needs and how they affect school functioning and classroom behavior. Services may also include behavior training and feedback to the family as it relates to healthy school and family functioning. Services that are primarily social or recreational are not reimbursable (notwithstanding that appropriate clinical interventions such as play therapy may be employed). Identified needs, measurable goals and the format and intensity of treatment shall be consistent with the youth/family Plan of Care.

While the SCBMHS Provider is not intended to be the only provider addressing the clinical mental health needs of the child and family, they shall be the primary behavioral health provider of counseling and therapy services and shall be principally focused on addressing youth and family mental health needs as they impact on school functioning and classroom stability.

Services will be provided in a manner that minimizes school disruption and attendance, and therapeutic sessions shall occur during times identified by the Child and Family Team. Services will include collaborative work with school staff (i.e., teacher, guidance counselor, and other support personnel) to strengthen their capacity to meet the emotional and mental health needs of enrolled youth through improved communication, consistency of goals and interventions, and broader support of the student, family, and school staff.

Non face-to-face activities are allowable at a rate of up to, but not exceeding, a 1:1 ratio of individual therapy/face-to-face activities to coaching/collateral contact and other activities in which the child is not present. Non face-to-face activities are limited to: client specific team building and planning with school administration and staff to create effective collaboration between mental health providers, Wraparound, school, and families; observation and evaluation of student; engaging parents and school staff in the creation and implementation of strategies to meet student and parent needs in the classroom; training and in-classroom coaching to model positive behavior management for teachers in the context of a specific child; other collateral contacts on a very limited basis which support the needs identified in the Plan of Care and which do not displace or conflict with the customary scope of the Child and Family Team process.

The School/Community Based Mental Health Services Provider will work with the Care Coordinator to encourage the participation of additional school staff in the Child and Family Team process, with a goal of attendance at each team meeting by one school representative in addition to the SCBMHS Provider. Travel time is can be billed per the parameters of Wraparound Policy #025, In Home Therapy.
School/Community Based Mental Health Services can be provided by:

1) Wisconsin Licensed Practitioners Practicing Privately or in a Wisconsin Certified Clinic
   • Licensed Clinical Social Worker
   • Licensed Marriage and Family Therapist
   • Licensed Professional Counselor
   • Licensed Psychologist
   • Psychiatrist

2) Music, Art, Dance Therapist with Wisconsin Psychotherapy License

3) Other Qualified Professionals in a Certified Outpatient Psychotherapy Clinic
   • Practitioner with a status Approval (3000 hour) Psychotherapy Letter issued by the Wisconsin Department of Health Services, Division of Quality Assurance (DHS, DQA).

Providers of School/Community Based Mental Health Services must also satisfactorily complete the Wraparound Milwaukee Practitioner Credentialing process and have a National Provider Identifier (NPI).

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### Shelter Care (Boys)

- **Service Code**: 5305
- **Billing Unit**: Daily
- **Credentials**: Shelter License
- **Description**: State-licensed facility for the temporary care and placement of a Wraparound-enrolled boy (ages 12-18) under a CHIPS order. This is to be used for a youth who is in transition to a more permanent living situation, i.e. home, foster or group home, or residential care center. A Wraparound agency referral form must be completed and given to the shelter care facility for a child in placement.
- **Rate**: $92.00

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### Shelter Care (Girls)

- **Service Code**: 5306
- **Billing Unit**: Daily
- **Credentials**: Shelter License
- **Description**: State-licensed facility for the temporary care and placement of a Wraparound-enrolled girl (ages 12-18) under a CHIPS order. This is to be used for a youth who is in transition to a more permanent living situation, i.e. home, foster or group home, or residential care center. A Wraparound agency referral form must be completed and given to the shelter care facility for a child in placement.
- **Rate**: $84.00

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### Shelter Care (Younger Children)

- **Service Code**: 5304
- **Billing Unit**: Daily
- **Credentials**: Shelter License
- **Description**: State-licensed facility for the temporary care and placement of a Wraparound-enrolled younger child (ages 6-11) under a CHIPS order. This is to be used for a youth who is in transition to a more permanent living situation, i.e. home, foster or group home, or residential care center. A Wraparound agency referral form must be completed and given to the shelter care facility for a child in placement.
- **Rate**: $84.00
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<thead>
<tr>
<th>Service Name / ID</th>
<th>Service Description</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
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<tbody>
<tr>
<td>5130 H2033</td>
<td>Special Therapy for juveniles, per 15 min Therapies, including art, dance, music, occupational therapy, including sensory integration therapy or Equine Facilitated Experiential Learning (therapeutic horseback riding that promotes psycho-social healing and growth.)</td>
<td>16.00</td>
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<td>Quarter Hour</td>
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<td><strong>Credentials:</strong></td>
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<tr>
<td></td>
<td>1) A Bachelor-degree therapist with 1,000 hours of work experience and who possesses the required credentials/licenses; for dance, art and music therapy, must be certified, registered, or accredited; For OT, must be licensed in Wisconsin. If certified by the National Board for Certification in OT (NBCOT), attach copies of providers’ certifications in the application process.</td>
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<td></td>
<td>2) Masters-level licensed psychotherapist in one of above special therapies; or</td>
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<td></td>
<td>3) BS/BA Degreed-individual with a minimum of 2,000 hours working with youth/families in which the focus of therapy may include promotion of social and/or work skills, community integration and/or recreational skill development, i.e. Recreation Therapist, Vocational Rehabilitation Therapist, etc.</td>
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<td></td>
<td>4) Certified member of the North American Riding for the handicapped Association (NARHA) in connection with Equine Facilitated Experiential Learning.</td>
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<td></td>
<td>5) Licensed Occupational Therapy Assistant under supervision of a licensed Occupational Therapist</td>
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<td>Documentation of experience and copies of certifications/registrations/accreditations/licenses must be provided, as applicable, in the application process in accordance with the foregoing.</td>
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<tr>
<td>5131 H2033</td>
<td>Special Therapy-Group for juveniles, per 15 min Therapies, including art, dance, music occupational therapy (including sensory integration therapy) or Equine Facilitated Experiential Learning (therapeutic horseback riding that promotes psycho-social healing and growth utilizing group process.)</td>
<td>8.00</td>
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<td>Quarter Hour</td>
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<td><strong>Credentials:</strong></td>
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<td></td>
<td>1) A Bachelor-degree therapist with 1,000 hours of work experience and who possesses the required credentials/licenses; for dance, art and music therapy, must be certified, registered, or accredited; For OT, must be licensed in Wisconsin. If certified by the National Board for Certification in OT (NBCOT), attach copies of providers’ certifications in the application process.</td>
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<tr>
<td></td>
<td>2) Masters-level licensed psychotherapist in one of above special therapies; or</td>
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<tr>
<td></td>
<td>3) BS/BA Degreed-individual with a minimum of 2,000 hours working with youth/families in which the focus of therapy may include promotion of social and/or work skills, community integration and/or recreational skill development, i.e. Recreation Therapist, Vocational Rehabilitation Therapist, etc.</td>
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<td>4) Certified member of the North American Riding for the handicapped Association (NARHA) in connection with Equine Facilitated Experiential Learning.</td>
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<td></td>
<td>Documentation of experience and copies of certifications/registrations/accreditations/licenses must be provided, as applicable, in the application process in accordance with the foregoing.</td>
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<td></td>
<td>Providers of this service is licensed by the State of Wisconsin and must have a National Provider Identifier (NPI).</td>
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Providers of this services licensed by the State of Wisconsin must have a National Provider Identifier (NPI).
This is an agency based, one-to-one service which must be identified in youth’s Plan of Care in relation to an educational need which can be reasonably achieved with focused, short term assistance. Specialized Academic Support is a time limited service not to exceed 90 days or 50 total hours of service, with an emphasis on the achievement of immediate outcomes which are linked to overall academic needs. Youth with an Individualized Education Plan shall receive individualized academic support services that support the needs identified on the IEP. For youth without an IEP, Provider shall document the need for this service by identifying individual strengths, limitations, and special academic needs via individual testing and/or a formal diagnosis such as a Learning Disorder, Cognitive Disorder, Emotional Disorder or other DSM IV Diagnosis that adversely impacts in the youth’s academic performance. An individualized support plan shall be developed and reviewed with the youth and family/Care Coordinator to identify the proposed measurable objectives for the service recipient to achieve short term academic goals. This plan shall identify specific learning objectives, their timeline for completion, and how they will be measured. Services shall focus on the basic areas of reading, writing, math, and study skills. Service intensity (hours per day, days per week) and duration will reflect individual needs. Pre/Post testing of youth shall be conducted initially and upon discharge or following 50 hours of service in order to document gains in a discharge report to be submitted to the family and Care Coordinator. Reports regarding the service recipient’s accomplishments and continuing challenges shall be provided through monthly face-to-face meetings with the parent/caregiver and in the form of a brief written monthly report that is to be submitted to the parent/caregiver and Care Coordinator. The report shall include the following minimum content:

1) Specific short term goals, expressed in terms of increases/decreases, by what amount, and how they are being measured. (e.g., perform 3rd grade level addition and subtraction with 75% accuracy, increasing from baseline of 50%, using [indicate measurement tool(s) if a standardized instrument, or attach if enrollee-specific].
2) For each goal, a description of the strategies being used to meet the goal.
3) For each goal, a description of the progress being made, to include revisions to the goal, if applicable. If goals are revised, a discussion of the rationale shall be included.

Outcome goals must be related to the youth’s immediate, short term academic needs and/or the youth’s ability to manage academic requirements associated with a classroom setting such as taking tests, completing homework, etc.

As part of the application process, agencies shall submit assessment, plan, and monthly and discharge report templates as well as testing instruments and/ or testing
### H2014  Community-based wrap services

**Credentials:** Agencies providing this service must employ teachers with current certification by the Department of Public Instruction of the State of Wisconsin in the appropriate academic area. Agencies with an onsite school may utilize Bachelor Degree staff under the oversight of a Special Education Teacher, but the Special Education Teacher providing the oversight must hold current DPI Certification. Current/valid teacher certifications must be submitted to the Wraparound Provider Network before services can be provided and must be kept on file at the agency. Agency must employ more than one provider to avoid disruption in scheduled services.

<table>
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<tr>
<th>Service Name / ID</th>
<th>Billing Unit</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
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<tbody>
<tr>
<td>5541 H0039</td>
<td>Daily</td>
<td>25.00</td>
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</table>

**Supervision/Observ. Service**

This service involves monitoring compliance with conditions of a court order including: school attendance, curfew or other court ordered conditions such as attendance at support groups or therapy sessions in order to maintain the client safely in the community. The frequency of this service varies, but may require seven day per week/daily monitoring. Contact may include morning wake-up visits, escorts to school or other court order identified appointments. Monitoring is by phone and face-to-face. Supervision/observation is designed to be short-term i.e.: 30 to 90 days.

**Credentials:** High School Diploma or G.E.D.; Bachelor’s Degree in a Human Services field is desirable.

Supervision of providers must be provided by an individual with a Bachelor’s Degree in a Human Service field and 2 years clinical experience, or an individual with a Master’s Degree, in a Human Services field (submit copy of supervisor credentials with application).

Provider Bulletin #2-03 provides detailed information about obtaining consent to transport clients and documentation requirements.

### H0039  Assertive community treatment prog

**Supported Indep Living-Phase I**

Supported Independent Living - Phase I services may be used (though they are not required) as a preliminary placement for adolescents ages 17 to 18 as deemed appropriate by the Child and Family Team process for youth receiving Supported Independent Living. “Phase I” is a 30 to 90 day temporary placement in a facility managed by or leased by the agency providing the service.

Supported Independent Living - “Phase I” allows assessment and preliminary preparation of youth where there may be concern about the youth’s preparedness to move directly to a community-based independent living under service code 5564.

This service requires daily contact with the youth. Full financial subsidies are provided for the youth in the areas of security deposits, utilities, transportation, food and laundry, and other spending money as appropriate. Skill development focuses on “hands on” opportunities in the areas of employment readiness, money management and budgeting, cooking, nutrition, health, meal preparation, shopping for groceries.

### H0043  Supported housing, per diem

NOTE: Do NOT need to submit copy of H.S. Diploma or G.E.D. Certificate to Wraparound (Maintain in agency file only.)
and other commodities, obtaining permanent housing, home management, and transportation.

Appropriate change of placement protocols established by Wraparound Milwaukee, Children’s Court and/or the Bureau of Milwaukee Child Welfare including obtaining a court order prior to placement must be followed by the Care Coordinator, provider agency and youth.

**Credentials:**
A Group Home License under Wisconsin State Statutes 48.60-48.77 must be submitted in the application process, along with documentation from the State Bureau of Fiscal Services establishing the daily rate.

Independent Living Program Coordinator must possess a minimum of a Bachelor's Degree with 2,000 plus hours of experience with children and families in a community setting and residential living program, i.e., group homes, foster care and residential treatment.

Staff are expected to have prior training and experience in providing independent living skills to this target population.

A description of the program and credentials of the coordinator must be provided in the application process.

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<tr>
<th>Service Name / ID</th>
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<th>Set IPN Rate</th>
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<tbody>
<tr>
<td>5564C H0043</td>
<td>Supported Indep Living-Youth and Parent</td>
<td>varies</td>
<td>122.00</td>
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**Supported Indep Living - Youth and Parent** is designed to maintain family unity while offering training and supervision for the youth and their parent in the area of independent living skills. The parent must be capable of managing an independent setting with minimal support services. This service is the same as Supported Independent Living (Service Code 5564), with modifications as outlined below.

Provider agency staff assists with locating and securing affordable, well-maintained, community-based housing to include:

- Negotiation and mediation with landlords related to rental agreements.
- Payment of security deposit and rent while the family receives this service. The provider will pay full payment for the first three to six months, with the parent being required to contribute one-half of the cost of the rent one month after securing employment.
- Some set-up assistance through a $200 start stipend to help purchase household items, table, beds, dressers, lamp, other furnishings. Additional assistance to be secured through other resources or funding sources available to the family.

Financial assistance with the following while receiving this service:
- Rent payment - $650/month for a two bedroom apartment
- Utility payments - $200/month on budget plan
- Telephone - $50/month
- Food/Miscellaneous - total expenditure of $475 per month. Recommended allotment per category is: groceries/food $300; miscellaneous (i.e.: household supplies, clothes and bus pass) $175. Dollar amount spent for the combined categories of

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food/miscellaneous is flexible though food is the priority.

This service also includes:
- Approximately 10 hours per week of individualized life skills/home management training.
- Curfew checks AM, PM, and weekend (combination of phone and face-to-face).
- Assistance with locating job opportunities (if not provided through another service provider).

ROLE OF THE WRAPAROUND CARE COORDINATOR:
Liaison to the Supported Independent Living Program Coordinator. Develop an individualized Plan of Care addressing the independent living needs of the parent and youth. Coordinate and monitor the other needed services as identified in the Plan of Care i.e. educational and treatment services. Assist youth and parent with obtaining additional supports such as Food Stamps.

Monitor progress and transitional planning for adolescent prior to being disenrolled.

Coordinate services with Children's Court and/or Bureau of Milwaukee Child Welfare, other providers, and community supports.

Wraparound Milwaukee Administration to approve initial placement and 1st month SAR entry with Care Coordinator to authorize monthly service via Turnaround SAR thereafter.

Service may be authorized for maximum of one month prior to the family moving into their own living quarters. Authorization for parent assistance, household management, daily living skills or life skills training at the same time this service is being authorized requires Wraparound administrative approval.

**Credentials:**

Independent Living Program Coordinator must possess a minimum of a Bachelor's Degree with 2,000 plus hours of experience with children and families in a community setting and residential living program, i.e., group homes, foster care and residential treatment.

Agency providers must possess a minimum of a High School diploma or equivalent with at least 2 years (full-time) experience in working with children or adults in an education, childcare or health care setting providing direct client services/care. Agency providers with bachelor’s degree or above and at least 1 year of experience working with the target population are not required to have additional oversight.

Staff is expected to have prior training and experience in providing independent living skills to the target population.

Supervision can be demonstrated in routinely conducted review meetings (documented at least monthly) or co-signing of documentation related to client participation in programming.
Youth referred for this service must be capable of managing in an independent setting with support services. This service is provided by Foster Youth Independence for female youth ages 17 to 18 with minor children who will be living with them in the their apartment. This service is the same as Supported Independently Living (Service Code 5564), with modifications associated as outlined below. Provider agency staff assist with locating and securing affordable, well-maintained, community-based housing to includes:

- Negotiation and mediation with landlords related to rental agreements.
- Payment of security deposit and rent while the youth receives this service. It is acceptable for the youth to have a roommate, however, minor child (or children) of youth must have a separate bedroom. The provider will pay full payment for the first three months, after which the adolescent will be asked to contribute one-half of the cost of the rent.
- Some set-up accommodations including providing a bed and dresser for the Wraparound enrolled youth $200 start up stipend.
- Financial assistance with the following while receiving this service:
  - Utility payments up to $200/month on budget plan
  - Food to $200/month.
  - Telephone to $50/month.
  - Diapers/baby supplies to $100/month.
  - Clothes/misc. to $75/month.
  - Transportation to $64/month (bus passes).

This services also includes:

- Approximately 8 hours per week of individualized life skills training.
- Daily house checks (combination of phone and face-to-face).
- School checks (daily if needed).
- Up to 8 hours per month life skills group.
- Monitoring and assistance with doctor appointment for youth and minor child/children.

Rate modification or repayment to Wraparound will be applied by Foster Youth Independence if the Bureau of Milwaukee Child Welfare assumes financial responsibility for services for the youth’s minor child/children or if the parent/legal guardian of the adolescent contributes to expenses outlined above.

ROLE OF THE WRAPAROUND CARE COORDINATOR:
Liaison to the Supportive Independent Living Program Coordinator. Develop an individualized Plan of Care addressing the independent living needs of the adolescent Coordinate and monitor the other needed services as delineated in the Plan of Care i.
e. educational and treatment services. Assist youth with obtaining additional supports such as Food Stamps and enrolling in WIC program.

Monitor progress and transitional planning for adolescent prior to being disenrolled.

Obtain Court and parent or legal guardian approval as required for the youth and dependent(s) placement.

Coordinate with Bureau Worker regarding the youth’s child/children including access to services such as day care, payment for formula, and diapers.

Assist with accessing natural support services in the community.

Wraparound Milwaukee Administration to approve initial placement and 1st month SAR entry with Care Coordinator to authorize monthly service via Turnaround SAR thereafter.

Service may be authorized for maximum of one month prior to the youth moving into their own living quarters. May not authorize daily living skills or life skills training at the same time this service is being authorized.

**Credentials:**

Independent Living Program Coordinator must possess a minimum of a Bachelor's Degree with 2,000 plus hours of experience with children and families in a community setting and residential living program, i.e., group homes, foster care and residential treatment.

Staff are expected to have prior training and experience in providing independent living skills to this target population.

A description of the program and credentials of the coordinator must be provided in the application process.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supported Independent Living</td>
<td>Varies</td>
<td>79.00</td>
<td>Daily</td>
</tr>
<tr>
<td>Supported housing, per diem</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

To locate affordable, well-maintained, accessible community-based housing options for adolescents age 17 to 18 and to provide a range of services to support their successful transition to independent living. Children referred to this service must be capable of managing in an independent setting with support services to includes the following:

- Negotiation and mediation with landlords related to rental agreements and payments. For affordability as well as security, it is desirable for adolescents referred to have roommates. This may not always be possible, but should be arranged whenever possible.

- Payment of rent (and security deposit prior to moving) for duration of placement. It
is expected that the provider will pay full payment for the first three months, after which the adolescent will be asked to contribute one-half of the cost of the rent (whenever possible). (For Lad Lake only.) Assist with daily living skills, i.e., budgeting, household management, nutrition, safety skills in the community, vocational needs, personal hygiene, leisure activity, future housing, accessing community resources, etc.

- Supervision through visits to the apartment with 24-hour coverage capability in case of emergencies related to the living situation. Assist with employment search followed by monitoring of employment situation (for Lad Lake only).

CRITERIA FOR PROGRAM
- Age 17
- Able to demonstrate emotional and behavioral stability and a level of self-sufficiency, i.e. taking medication, attending school, employed or close to employment and job readiness, motivation to living independently and plan for future, able to manage money and or willing to accept payee if needed.
- Approved by the Court and parent or legal guardian with ongoing involvement with parent/legal guardian whenever possible.
- If adolescent girl referred has her own child(ren), the Bureau of Milwaukee Child Welfare must coordinate services for the baby or young child. Parent/legal guardian for adolescent and baby must contribute to expenses whenever possible.

ROLE OF OTHER WRAPAROUND CARE COORDINATOR:
Liaison to the Supportive Independent Living Program Coordinator. Develop an individualized Plan of Care addressing the independent living needs of the adolescent Coordinate and monitor the other needed services as delineated in the Plan of Care i.e. educational and treatment services.

Monitor progress and transitional planning for adolescent prior to being disenrolled.

Coordinate with Bureau Worker when the adolescent has a baby or young child in their care to access services such as day care, formula, and diapers.

Assist with accessing natural support services in the community.

QUALIFICATIONS AND ROLE OF THE SUPPORTED INDEPENDENT LIVING PROGRAM COORDINATOR:
Supervise staff providing day to day assistance.
Vocational and job coaching provided as identified in the Plan of Care.

Communication and collaboration with Wraparound Care Coordinator, i.e. attend Plan of Care and Family Team Meetings.

Monitor and document progress in independent living.

Evaluate further independent living needs prior to disenrollment from Wraparound.

Credentials: Independent Living Program Coordinator must possess a minimum of a Bachelor's Degree with 2,000 plus hours of experience with children and families in a community setting and residential living program, i.e., group homes, foster care and residential treatment.

Staff are expected to have prior training and experience in providing independent living skills to this target population.

Supportive Foster Care-Level 1

For St. Aemilian-Lakeside Only:

Designed for youth who have made significant treatment progress in the foster home. A trusting relationship exists between the youth and skilled caregiver. Problems which may arise in the home, school, and community are satisfactorily resolved through supportive services. Often these youth are awaiting adoption, a transfer of guardianship or are stable siblings of youth requiring a higher level of care.

Credentials: Child Placing Agency License

Suspension Accountability Program

Suspension School Diversion is an intervention program designed for students suspended from school for various offenses. Services to be provided within the context of the day program shall include tutoring, daily living skills, supported work environment, life skills training, and informal counseling and support (in which the focus is not treatment). Transportation may also be provided. Students that are enrolled in this program are monitored closely and must work on academic subjects while in attendance. A day plan/curriculum must be presented in the application process along with hours of operation. This service may not provide day treatment.

Credentials: Teachers/facilitators of services must provide documentation setting forth prior tutoring and/or teaching experience. A Day Care License is required if serving more than three through the age of 12.

Targeted Case Mgmt / SAIL Service

Targeted Case Management Services are accessed through the Adult Community Services/SAIL Programs to assist youth and young adults (17 ½ and over) to

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transition into the adult behavioral health service system. Targeted Case Management services are an adjunct service to care coordination designed to provide expert assessment and resource support to those youth over 17½ years of age with serious emotional and mental health needs (commonly referred to as Tier 3 youth). The Targeted Case Manager will assist the care coordinator and Child & Family Team to better understand and plan for the needs of these youth who are likely to need long-term support from the Adult Community Services Program. The Targeted Case Manager can specifically assist the care coordinator to help the young person obtain their social security card, apply for and/or retain their SSI, apply for Food Share and secure housing. The Targeted Case Manager will participate in the Child & Family Team meetings and will work with all Wraparound Programs as needed, including regular Wraparound, REACH, FOCUS, Project O’YEAH and the re-entry project.

Targeted Case Management services are only being purchased through Alternatives In Psychological Consultation at this current time.

The Targeted Case Manager will provide direct face-to-face contact only with enrolled youth and their families referred to them and approved by the SAIL program. The Targeted Case Manager will also provide phone consultation, collateral contact and other help needed to ensure the youth person makes the best possible transition into the Adult Community Services System.

_Credentials_: The Targeted Case Manager must possess a BA/BS degree in Social Work, Psychology, Nursing, Occupational Therapy or a related human service field with case management in the adult behavioral health system experience preferred.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>5576A T2003</td>
<td>5.00</td>
<td>5.00</td>
<td>Trip</td>
</tr>
</tbody>
</table>

_Credentials_: Per established City of Milwaukee ordinance/requirements at the time that service is provided.

Payment American United Taxicab Services for client "No Show" - ride is dispatched but client is not there and taxi does not return for paid fair for the same ride that day.

Transportation services provided by American United Taxicab Service for destinations within 10 miles of the Milwaukee County limits. Trips (rides) are arranged in advance by the Wraparound Milwaukee Care Coordinator or FISS Case Manager using the Wraparound Milwaukee Transportation Referral Form. Authorized rides (per the referral form and plan of care) may include: therapy appointments, doctor appointments, job interviews and other non-therapeutic appointments. Trips (rides) may be for one-way or round trip, single episode or repeat rides to the same destination. Once the ride has been set-up by the Care Coordinator or FISS Case Manager, the Service Recipient must accept the ride to the prescribed destination. American United Taxicab will NOT accept a request from the Service Recipient to change the identified destination.
For “Round Trip” rides, the Service Recipient or another responsible party at the point of origin for the return ride must contact American United TaxiCab by phone to arrange for the return ride.

One time, “emergent” rides should be documented as such in a progress note.

The rate paid to American United TaxiCab Services is per established City of Milwaukee Ordinances in effect at the time of the ride. In 2008, the rates are as follows:
- $2.25 base rate
- $2.00 per mile and $2.50 per 10 minutes in the cab
- $0.75 extra passenger
- $5.00 per ride – NO SHOW – no maximum

REQUEST FOR TAXICAB TO WAIT
American United TaxiCab requires payment for the TaxiCab if asked to wait for the Service Recipient (example: waiting at pharmacy for prescription to be filled). Wraparound Milwaukee WILL NOT AUTHORIZE REQUESTS FOR CABS TO WAIT for the Wraparound Milwaukee Service Recipient whether the Service Recipient remains in the taxicab or leaves the taxicab. If asked, the American United TaxiCab driver will decline the request to wait. If the Wraparound Milwaukee Service Recipient leaves the taxicab – the driver will depart and end the ride.

Only Wraparound Milwaukee Care Coordinators, FISS Case Managers and authorized Wraparound Finance staff may authorize a trip (ride) with American United TaxiCab Service.

**Credentials:** Per established City of Milwaukee ordinance/requirements at the time that service is provided.

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<thead>
<tr>
<th>Service Name / ID</th>
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<th>Billing Unit</th>
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<tbody>
<tr>
<td>5506</td>
<td>25.00</td>
<td>Daily</td>
<td></td>
</tr>
<tr>
<td>T1017</td>
<td>Targeted case mgmt, per 15 min</td>
<td>Working within the Wraparound Milwaukee Program and Project O’YEAH, Healthy Transition’s federal grant, a transitional specialist provides care coordination type services for youth and young adults, 16½ to 24 who have a serious emotional or mental health need and need mental health services and other support as they make the transition to adult hood. Types of services these youth and young adults need and may be provided or arranged by a transitional specialist includes: assessment, case management, community advocacy, access to mental health care, housing, employment, education or GED, independent living skills and other services and supports.</td>
<td></td>
</tr>
</tbody>
</table>
A Transitional specialist may provide consultation services to youth and the Child and Family Team while those youth, age 16½ or older are served by the regular Wraparound or REACH program. They may also link youth and young adults to the Project O’YEAH Club House program to receive support, participate in group and skill building activities and recreation. The transitional specialist also may link youth with severe mental health needs to the Adult Services or SAIL program.

Transitional Specialists help the young adult to develop a “Futures Oriented” care plan using the Wraparound Transition to adult hood and “TIP” curriculums.

Transitional Specialists also document all care planning activities required by Wraparound Milwaukee and Federal Grant on the required information system including Synthesis and National Outcome Measurement Scale (NOMS).

Currently providers are limited to agencies designated to provide services to homeless youth (Pathfinders), youth transitioning out of foster care (Lad Lake) and St. Charles Youth and Family Services.

**Credentials:**
Transitional Specialists must possess a BA/BS degree in Social Work, Sociology, Psychology, Nursing, Occupational Therapy or a related field with experience in Human Services work, preferably in case management.

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<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
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</thead>
<tbody>
<tr>
<td>5577 T2003</td>
<td>15.00</td>
<td></td>
<td>Trip</td>
</tr>
</tbody>
</table>

Transportation of Wraparound/FISS enrolled clients and families based on a referral for services for the Care Coordinator or Case Manager.

Authorized trips (rides) (per the referral form and plan of care) may include: therapy appointments, doctor appointments, job interviews and other non-therapeutic appointments. Trips (rides) may be for one-way or round trip, single episode or repeat rides to the same destination. Once the ride has been set-up by the Care Coordinator or FISS Case Manager, the Service Recipient must accept the ride to the prescribed destination.

Agencies providing transportation services must have an “emergency plan” policy that details the action/s the agency will follow in the event of an accident or if a youth/service recipient becomes ill while receiving services.

Transportation providers must obtain clients/responsible adult signatures for all rides.

**Credentials:**
Valid State of Wisconsin Driver’s License

**Criteria:**

1. All transport drivers must have a valid Wisconsin driver’s license.
2. A valid Commercial Driver’s License (Class C Minimum) is required for drivers of vehicles used to transport 15 or more passengers.

3. An endorsement “S” on the driver’s license is required for school bus drivers.

4. A Wisconsin Department of Transportation public driver record abstract that demonstrates a driving record free of serious traffic violations.

5. A copy of a Vehicle Inspection Report for each vehicle used to transport clients. All vehicles must have a sticker with the current year verifying the vehicle inspection.

6. Agency must comply with Caregiver Background Check and Insurance requirements as specified in the Wraparound Milwaukee Fee-for-Service Agreement in effect at the time the service is provided.

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<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
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</thead>
<tbody>
<tr>
<td>5578 T2003</td>
<td></td>
<td></td>
<td>Miles</td>
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</tbody>
</table>

Transportation Mileage is used by WRAPAROUND MILWAUKEE FINANCE STAFF to reimburse Transportation Providers for mileage associated with Transportation Services authorized under Code 5577 – Transportation where total mileage for the ride is 6.0 miles or more. Transportation Mileage payments are limited to rides within 20 miles of the Milwaukee County line. Rides to destinations that are more than 20 miles outside the Milwaukee County limits must be prior authorized by the Wraparound Milwaukee Finance Director. Care Coordinators are responsible for obtaining this authorization prior to submitting a referral for services.

Transportation Mileage is reimbursed in tenths of a mile at the rate in effect at the time the service was provided.

**Non-emergency transportation**

*Credentials:* Agency is authorized to provide Service Code 5577- Transportation and meets all requirements associated with Service Code 5577 – Transportation.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
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</thead>
<tbody>
<tr>
<td>5579 T2003</td>
<td></td>
<td></td>
<td>Each</td>
</tr>
</tbody>
</table>

Transportation Additional Passenger (Code 5579) is used by WRAPAROUND MILWAUKEE FINANCE STAFF to reimburse Transportation Providers where one or more additional passengers accompany the identified service recipient. Transportation Additional Passenger payments are made based on the Care Coordinator/Case Manager’s referral for Transportation (Code 5577) that identifies a total of 2 or more passengers and verification of the multiple passenger ride per the transportation log. NO ADDITIONAL mileage payments will be made for additional passengers.

**Non-emergency transportation**

*Credentials:* Agency is authorized to provide Service Code 5577- Transportation and meets all requirements associated with Service Code 5577 – Transportation.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
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</thead>
<tbody>
<tr>
<td>5570 T2003</td>
<td></td>
<td></td>
<td>Total</td>
</tr>
</tbody>
</table>

For Wraparound & SafeNow: Transportation arranged by case managers and other non-transportation vendors in the Network for the purpose of transporting child and families to non-therapeutic sessions, parent support service activities, recreational activities, etc., as documented in the Plan of Care. Transportation may be provided.
by a family member or other person designated by the family. Transportation is arranged by the case manager in the pre-authorization process, and Wraparound Milwaukee/SafeNow reimburses the case management agency for the actual costs.

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**Credentials:**

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Billing Unit</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>5311 S5145</td>
<td>Daily</td>
<td>103.70</td>
<td></td>
</tr>
</tbody>
</table>

This service is for Wraparound Youth. Treatment Foster Care is provided by agencies which are licensed by the State to provide treatment foster care and meet Chapter 56 and Chapter 38 of the State Licensing Rules. As specified in Chapter 38.03 (27):

“Treatment Foster Care means a foster family-based and community-based approach to treatment for a child with physical, mental, medical, alcohol or other drug abuse, cognitive, intellectual, behavioral, developmental or similar problems which is designed to change the behavior or ameliorate the condition which in whole or in part resulted in the child’s separation from his or her family. The approach utilizes specially selected and specially trained treatment foster parents who, as members of a treatment team, have shared responsibility for implementing the child’s treatment plan as the primary change agents in the treatment process.”

Among the responsibilities of the foster parent under HFS 38.06 that are of particular importance to Wraparound Milwaukee are:

1) Assuming primary responsibility for implementing in-home care and treatment strategies specified in the treatment plan.
2) Assisting and supporting a foster child in having appropriate and positive contact with his/her family.
3) Providing or arranging transportation for the child as deemed necessary by the child and family treatment team.
4) Cooperatively and consistently carrying out the Treatment Plan.
5) Participating in the evaluation of his/her performance on a regularly scheduled basis.

Responsibilities of the Provider treatment foster care agency and agency social service case manager in HFS 38.07 and HFS 38.10 of primary importance to Wraparound Milwaukee in purchasing this service are:

- Arranging for a minimum of one unit of respite care per month. One unit shall consist of no less than 8 or no more than 24 consecutive hours. It will be determined by the Treatment Foster Care Agency if these units can be accumulated.
- Providing or arranging for additional child care personnel during critical periods,
such as after school or evenings.
- Advocating for the child with the staff of the child’s school (emphasis on public school programs).
- Ensuring in the case of a child with a severe emotional disturbance that in addition to any other professionals on the child and family team, that a clinical consultant is also assigned to the family. The social worker, social services case manager or other professional involved in the care may serve as the clinical consultant if the individual meets the requirements under HFS 38.03(8).
- Contacting the foster parent at least twice monthly (one of the contacts must be face to face) for the purpose of assisting treatment foster parents in implementing treatment plans, assessing training needs of foster parents and providing skill training for specific problems encountered by the foster parents.
- Personally seeing and interacting with the child at least twice per month in a variety of settings, i.e. home, school, community.

Since Treatment Foster Homes are considered therapeutic settings and are required under HFS 38 to provide a range of services and supports, Wraparound Milwaukee will not as a rule authorize in-home therapy in the foster home for the foster parent and child, cover transportation costs for the child or fund after-school services for children in this setting. In-home therapy for the child and their biological parent(s) may be authorized for up to 90 days prior to reunification with the parent.

Credentials:
Child Placing Agency License

The treatment foster parents and/or the supervising Master’s level provider must be available to the youth at all times. The treatment foster parents shall document daily contact notes relevant to their provision of mental health crisis services. The treatment foster care agency shall maintain accurate and current documentation of all staff members’ qualifications, including copies of degrees, training certificates, licenses, etc., and shall verify that all treatment foster parents meet the minimum requirements listed in HFS 34.21 (3)(b) 1-19. All other requirements relevant to hiring under caregiver law in Wisconsin apply. Supervision and training shall be provided as follows:

1. Medicaid requires that treatment foster parents with more than 6 months’ experience providing care to a child with serious emotional and mental health disturbance have at least 20 hours of initial training and orientation within the first 3 months of foster parenting; those with less than 6 months require 40 hours of initial training within the first 3 months.
2. Foster parents must also receive at least 8 hours of additional training per year. Documentation of all training must be maintained on site at the treatment foster care vendor agency.
3. Treatment foster parents must receive one hour of weekly supervision by a Master’s level provider. Agencies must maintain documentation of this supervision. The weekly supervision should include a review of how the treatment foster parents are implementing the child’s crisis/safety plans and are effectively utilizing the plan.
<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Billing Unit</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>5311A S5145</td>
<td>Treat. Foster Care (Agency) Youth w/</td>
<td>Daily</td>
<td>128.98</td>
</tr>
<tr>
<td></td>
<td>Foster care, therapeutic, child, per diem</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

This service is for Wraparound Youth with a dependent child or children that are placed with the youth in the treatment foster home.

Among the responsibilities of the foster parent under HFS 38.06 that are of particular importance to Wraparound Milwaukee are:
1) Assuming primary responsibility for implementing in-home care and treatment strategies specified in the treatment plan.
2) Assisting and supporting a foster child/youth in having appropriate and positive contact with his/her family.
3) Providing or arranging transportation for the youth and dependent child/children as deemed necessary by the Child and Family Treatment Team.
4) Cooperatively and consistently carrying out the Treatment Plan.
5) Participating in the evaluation of his/her performance on a regularly scheduled basis.

Responsibilities of the Provider/Treatment Foster Care Agency and agency social service case manager in HFS 38.07 and HFS 38.10 includes:
- Arranging for a minimum of 8 to 24 hours of respite care to the foster parent.
- Providing or arranging for additional childcare personnel during critical periods, such as after school or evenings.
- Advocating for the youth and dependent children with the staff of the youth/children’s school(s) (emphasis on public school programs).
- Ensuring in the case of a youth with a severe emotional disturbance that in addition to any other professionals on the Child and Family Team, that a clinical consultant is also assigned to the family.
- Contacting the foster parent at least twice monthly (one of the contacts must be face to face) for the purpose of assisting treatment foster parents in implementing treatment plans, assessing training needs of foster parents and providing skill training for specific problems encountered by the foster parents.
- Personally seeing and interacting with the youth at least twice per month in a variety of settings, i.e. home, school, community.

Since Treatment Foster Homes are considered therapeutic setting, Wraparound Milwaukee will not authorize in-home therapy in the foster home for the foster parent, cover transportation costs for the youth or fund after-school services for youth in this setting. In-home therapy for the youth and their biological parent(s) may be authorized for up to 90 days prior to reunification with the parent.

**Credentials:** State of Wisconsin Child Placing Agency License

Licensed by the State to provide treatment foster care, the agency and its providers must meet the requirements set forth in State of Wisconsin Chapter
HFS 56 "Foster Home Care for Children" and Chapter HFS 38 "Treatment Foster Care for Children".

The agency is responsible for providing up-to-date licenses for foster parents with which Wraparound youth are placed.

The treatment foster parents and/or the supervising Master’s level provider must be available to the youth at all times. The treatment foster parents shall document daily contact notes relevant to their provision of mental health crisis services. The treatment foster care agency shall maintain accurate and current documentation of all staff members’ qualifications, including copies of degrees, training certificates, licenses, etc., and shall verify that all treatment foster parents meet the minimum requirements listed in HFS 34.21 (3)(b) 1-19. All other requirements relevant to hiring under caregiver law in Wisconsin apply. Supervision and training shall be provided as follows:

1. Medicaid requires that treatment foster parents with more than 6 months’ experience providing care to a child with serious emotional and mental health disturbance have at least 20 hours of initial training and orientation within the first 3 months of foster parenting; those with less than 6 months require 40 hours of initial training within the first 3 months.
2. Foster parents must also receive at least 8 hours of additional training per year. Documentation of all training must be maintained on site at the treatment foster care vendor agency.
3. Treatment foster parents must receive one hour of weekly supervision by a Master’s level provider. Agencies must maintain documentation of this supervision. The weekly supervision should include a review of how the treatment foster parents are implementing the child’s crisis/safety plans and are effectively utilizing the plan.

<table>
<thead>
<tr>
<th>Service Name / ID</th>
<th>Billing Unit</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Daily</th>
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</thead>
<tbody>
<tr>
<td>5312B S5145</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Treat. Foster Care Specialized Foster care, therapeutic, child, per diem</td>
<td>Specialized foster care agency, i.e. teen and baby or child with multiple needs to include highly specialized services. Services may include the following: *Independent Living Skills Programming *24-hour Crisis Intervention *Baby Care/Parenting and Nurturing Programming *Medical/Physical/Cognitive needs</td>
<td></td>
<td></td>
<td>138.50</td>
</tr>
</tbody>
</table>

Credentials:

Homes must be licensed as Treatment Foster Homes by the agency. Agencies must submit a Child Placing Agency License in the application process.

The treatment foster parents and/or the supervising Master’s level provider must be available to the youth at all times. The treatment foster parents shall document daily contact notes relevant to their provision of mental health crisis services. The treatment foster care agency shall maintain accurate and current documentation of all staff members’ qualifications, including copies of degrees, training certificates, licenses, etc., and shall verify that all treatment foster parents meet the minimum requirements listed in HFS 34.21 (3)(b) 1-19. All other requirements relevant to hiring under caregiver law in Wisconsin apply. Supervision and training shall be provided as follows:

1. Medicaid requires that treatment foster parents with more than 6 months’ experience providing care to a child with serious emotional and mental health disturbance have at least 20 hours of initial training and orientation within the first 3 months of foster parenting; those with less than 6 months require 40 hours of initial training within the first 3 months.
2. Foster parents must also receive at least 8 hours of additional training per year. Documentation of all training must be maintained on site at the treatment foster care vendor agency.
3. Treatment foster parents must receive one hour of weekly supervision by a Master’s level provider. Agencies must maintain documentation of this supervision. The weekly supervision should include a review of how the treatment foster parents are implementing the child’s crisis/safety plans and are effectively utilizing the plan.

<table>
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<tr>
<th>Service Name / ID</th>
<th>Set IPN Rate</th>
<th>Avg IPN Rate</th>
<th>Billing Unit</th>
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<tbody>
<tr>
<td>5504 T1017</td>
<td>198</td>
<td>Daily</td>
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</table>

The professional foster parent shall provide a transitional home devoted to the needs of one youth with the ultimate goal of helping and supporting that youth to achieve permanency with their family.

Duties and Responsibilities:
1. Establish a caring, supportive, nurturing relationship with one adolescent young woman
2. Provide care coordination services, therapeutic intervention and support designed to help re-connect a young woman to her parent/s and strengthen bonds between the child and her parent/s.
3. Help prepare a young woman to be independent, feel confident and possess the skills necessary to live in her home and community. Activities include supporting her to attend school, provide tutoring to improve school performance and help with vocational preparedness.
4. Assume in partnership with parent/s the role of an advocate for the young woman including attending school, conferences, IEP meetings etc. Attends all court hearings with the young woman and her family and be accountable for youth following all court ordered conditions in accordance with her family members.
5. Maintain and encourage regular contact with the youth’s parent/s and include the parent/s in recreational and other activities that keep them involved and connected with their child to support ultimate transition home.
6. Help develop with youth and parent/s, an individualized Plan of Care based on identified strengths, needs and resources of child, including a comprehensive 24-hour crisis/safety plan.
7. Help create with the youth and parent, a crisis safety plan that allows the child with safe places to run to and provide for a child to return to the foster home in a non-judgmental manner.
8. Facilitate team meetings to develop and update Plan of Care at least every 30 days.
9. Maintain regular contact with necessary individuals the youth may have involved in her life including Bureau Case Managers, Probation Workers, Judges, District Attorneys, etc.
10. Attend and provide transportation to all medical appointments in conjunction with young woman’s parent/s. Assures follow through on all recommendations and/or needed medical attention.
11. Provide support, follow-ups, respite as needed to facilitate the transitional period to successful reunify the child with her parent/s. Includes a period of at least 90 days after re-unification to support youth’s success in her family home.
12. Provide respite and support to other young women placed in similar homes, participate in support groups as desired with other professionals in the program
13. Seeks out assistance and support from other team members, foster care agency and Wraparound Milwaukee as needed.

Credentials: Possesses a BA/BS degree in Social Work, Psychology, Nursing, Occupational Therapy or a BA or BS degree in an unrelated field with experience in human services, preferably case management or equivalent area.

OR

Possesses a high school diploma or GED equivalent with at least two years experience as foster parent, youth worker, mentor, or crisis worker or related job with experience working with youth with serious emotional and mental health needs.
1. Able to be licensed by a treatment foster care agency under HFS 38 and 56.
2. Will keep all licenses, certifications and insurance policies current and on file with the foster care agency.
3. Will be evaluated on a bi-annual basis within the first year of licensing unless circumstances suggest the need for a special evaluation.
4. Be responsible for familiarizing themselves with the materials in the treatment foster care agency’s manual and otherwise comply with all HFS 38 and HFS 56 rules.

The professional foster parent shall provide a transitional home devoted to the needs of two youth placed with the ultimate goal of helping and supporting the youth to achieve permanency with their family.

Duties and Responsibilities:
1. Establish a caring, supportive, nurturing relationship with each of the adolescent young woman
2. Provide care coordination services, therapeutic intervention and support designed to help re-connect the young to their parent/s and strengthen bonds between the youth and their parent/s.
3. Help prepare the youth to be independent, feel confident and possess the skills necessary to live in their home and community. Activities include supporting school attendance, provide tutoring to improve school performance and help with vocational preparedness.
4. Assume in partnership with youth's parents the role of an advocate for the youth including attending school, conferences, IEP meetings etc. Attends all court hearings with the youth and their families and be accountable for the youth following all court ordered conditions in accordance with their family members.
5. Maintain and encourage regular contact with the youth's parent/s and include the parent/s in recreational and other activities that keep them involved and connected with their child to support ultimate transition home.
6. Help develop with youth and parent/s, an individualized Plan of Care based on identified strengths, needs and resources, including a comprehensive 24-hour crisis/safety plan.
7. Help create with the youth and parent, a crisis safety plan that allows the youth safe places to run to and provide for the youth to return to the foster home in a non-judgmental manner.
8. Facilitate team meetings to develop and update Plan of Care at least every 30 days.
9. Maintain regular contact with necessary individuals the youth may have involved in their life including Bureau Case Managers, Probation Workers, Judges, District Attorneys, etc.
10. Attend and provide transportation to all medical appointments in conjunction with youth's parent/s. Assures follow through on all recommendations and/or needed medical attention.
11. Provide support, follow-ups, respite as needed to facilitate the transitional period to successful reunify the youth with their parent/s. Includes a period of at least 90 days after re-unification to support youth’s success in their family home.
12. Provide respite and support to other young women placed in similar homes, participate in support groups as desired with other professionals in the program
13. Seeks out assistance and support from other team members, foster care agency and Wraparound Milwaukee as needed.

Credentials: Possesses a BA/BS degree in Social Work, Psychology, Nursing, Occupational Therapy or a BA or BS degree in an unrelated field with experience in human services, preferably case management or equivalent area.

OR

Possesses a high school diploma or GED equivalent with at least two years experience as foster parent, youth worker, mentor, or crisis worker or related job with experience working with youth with serious emotional and mental health needs.
1. Able to be licensed by a treatment foster care agency under HFS 38 and 56.
2. Will keep all licenses, certifications and insurance policies current and on file with the foster care agency.
3. Will be evaluated on a bi-annual basis within the first year of licensing unless circumstances suggest the need for a special evaluation.
4. Be responsible for familiarizing themselves with the materials in the treatment foster care agency’s manual and otherwise comply with all HFS 38 and HFS 56 rules.

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<td>5504B T1017</td>
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This service is the same as Treatment Foster Care - Care Coordination (shown below) EXCEPT THAT the youth is no longer living in the home of the treatment foster parent.

Duties and Responsibilities:
1. Establish a caring, supportive, nurturing relationship with one adolescent young woman
2. Provide care coordination services, therapeutic intervention and support designed to help re-connect a young woman to her parent/s and strengthen bonds between the child and her parent/s.
3. Help prepare a young woman to be independent, feel confident and possess the
skills necessary to live in her home and community. Activities include supporting her to attend school, provide tutoring to improve school performance and help with vocational preparedness.

4. Assume in partnership with parent/s the role of an advocate for the young woman including attending school, conferences, IEP meetings etc. Attends all court hearings with the young woman and her family and be accountable for youth following all court ordered conditions in accordance with her family members.

5. Maintain and encourage regular contact with the youth’s parent/s and include the parent/s in recreational and other activities that keep them involved and connected with their child to support ultimate transition home.

6. Help develop with youth and parent/s, an individualized Plan of Care based on identified strengths, needs and resources of child, including a comprehensive 24-hour crisis/safety plan.

7. Help create with the youth and parent, a crisis safety plan that allows the child with safe places to run to and provide for a child to return to the foster home in a non-judgmental manner.

8. Facilitate team meetings to develop and update Plan of Care at least every 30 days.

9. Maintain regular contact with necessary individuals the youth may have involved in her life including Bureau Case Managers, Probation Workers, Judges, District Attorneys, etc.

10. Attend and provide transportation to all medical appointments in conjunction with young woman’s parent/s. Assures follow through on all recommendations and/or needed medical attention.

11. Provide support, follow-ups, respite as needed to facilitate the transitional period to successful reunify the child with her parent/s. Includes a period of at least 90 days after re-unification to support youth’s success in her family home.

12. Provide respite and support to other young women placed in similar homes, participate in support groups as desired with other professionals in the program.

13. Seeks out assistance and support from other team members, foster care agency and Wraparound Milwaukee as needed.

Credentials: Credentials are the same as for Treatment Foster Care - Care Coordination:
Possesses a BA/BS degree in Social Work, Psychology, Nursing, Occupational Therapy or a BA or BS degree in an unrelated field with experience in human services, preferably case management or equivalent area.

OR

Possesses a high school diploma or GED equivalent with at least two years experience as foster parent, youth worker, mentor, or crisis worker or related job with experience working with youth with serious emotional and mental health needs.

1. Able to be licensed by a treatment foster care agency under HFS 38 and 56.

2. Will keep all licenses, certifications and insurance policies current and on file with the foster care agency.
3. Will be evaluated on a bi-annual basis within the first year of licensing unless circumstances suggest the need for a special evaluation.

4. Be responsible for familiarizing themselves with the materials in the treatment foster care agency’s manual and otherwise comply with all HFS 38 and HFS 56 rules.

### Treatment Plan Meeting Attendance

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<tr>
<td>5222A H0032</td>
<td>96.00</td>
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Reimbursement of treatment providers participating in treatment plan meetings related to the child’s treatment plan, such as the child and Family Team meetings, Plan of Care meetings, school or day treatment staffings and other meetings. Attendance at such meetings for which reimbursement is sought must be for the purpose of discussing and providing consultation related to the treatment needs, strategies and goals as identified in the child’s treatment plan. Providers of the following services are eligible to be reimbursed for attendance at treatment meetings:

1. AODA Assessment (5001)
2. Individual/Family Therapy-Office Based (5100)
3. Individual Therapy-Ph.D.-Office Based (5111A)
4. Substance Abuse Counseling & Therapy (5101)
5. Group Counseling & Therapy (5120)
6. AODA Group Counseling & Therapy (5121)
7. Special Therapy (5130)
8. Special Therapy-Group (5131)

Only the above treatment providers will be reimbursed. Providers of other services may obtain reimbursement as delineated in the service descriptions, Policy and Procedure, or Provider Bulletin.

**Credentials:** See Credential required for providers under the respective services eligible for reimbursement, i.e. 5001, 5050, 5051, 5100, 5111A, 5101, 5120, 5121, 5130 and 5131

### Tutor

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<tr>
<td>5521 H2021</td>
<td>22.00</td>
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<td>Hour</td>
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A Tutor provides after school assistance with academic school assignments when the child has identified remedial needs and is below grade level. This must be documented as an academic/educational need in the Plan of Care under the "Education Domain" for Wraparound and in the Safety Service plan for Safenow. A Tutor provides a one to one service that cannot be provided to more than one child at a time.

Agencies providing Tutor services must comply with all requirements set forth in the Fee-for Service Agreement, the required Criminal Background checks (the CIB – email address:https://wi-recordcheck.org.), and valid Driver's licenses (Department of Motor Vehicle driving abstract by call 608-266-2353) for all individuals employed to provide tutor Services prior to performing the service. If transporting children, a consent form signed by the parent/legal guardian must be in the case file at the agency.
Agencies must have General Liability Insurance as required in the Fee-for Service Agreement. Individual providers transporting clients, must have necessary automobile insurance and a copy must be in the employee's file.

A completed log must be signed by parent/legal guardian and care coordinator for Wraparound (not Safety Service Manager for Safenow), to verify delivery of services and be kept in the case file at the agency as documentation and for auditing. (Refer to Provider Bulletin 4-03.)

Community-based wrap services, per 15 min

Credentials: Tutors are required to have knowledge of the subject matter and possess at least one year past experience in tutoring, teaching or other academic accomplishment. Tutors show evidence of experience/training/certification/education specific to tutoring to be kept in their agency employee file and submitted to the Integrated Provider Network prior to providing services. Evidence of experience/training/certification/education can be submitted in the form of resume and two reference letters from a past/current employer or an actual teaching degree/degree in education or a letter from the agency director certifying the employee’s prior experience as a tutor.

Agencies must submit their training curriculum outlining the 15 hours of training for approval by the Provider Network when applying for this service. A minimum of 15 hours training is required of all staff prior to service provision. A copy of the 15-hour training verification form verifying this training and a resume must be submitted to the Provider Network and a copy maintained in the agency employee file.

5520 Tutoring - Group Community-based wrap services, per 15 min

Group Tutoring is provided to youth in groups of no more than 5 individuals by school based agency staff after school and on non-school days. Conducted by school staff in the school or day treatment setting, the groups are designed to provide guidance with the completion of assigned homework and help the youth improve their study habits. Youth referred for Group Tutoring services may be below grade level or experiencing difficulty with class work resulting in risk of receiving a failing grade in one or more academic classes. Whenever possible, the Care Coordinator should include school contact information for youth referred for this service so that agency staff can communicate directly with school staff regarding homework assignments. Youth will be asked to bring their homework to the group. The agency will maintain a daily record of the youth’s work and accomplishments and will submit a monthly progress report to the care coordinator through Synthesis. The youth’s Plan of Care should reflect the need for this service under the "Education Domain". Youth receiving this service may be comingled with youth receiving tutoring services through the agency’s After School Program.

Community-based wraparound

Credentials: Tutors are required to have knowledge of the subject matter and possess at least one year past experience as a tutor, teaching assistance or teacher. Oversight of the agency Tutoring Program is to be provided by a Wisconsin Department of Public Instruction certified teacher. The program supervisor is to review youth’s participation and performance with the agency direct service providers on a weekly basis, providing staff guidance and direction as
The purpose of this service is to develop a peer specialist curriculum, and help recruit and train up to 15 young adults, ages 18-24, to provide peer specialist services for the Healthy Transitions Initiative (Project O'YEAH) and possibly for the Wraparound Milwaukee and REACH Programs.

Youth Peer Specialists are young adults who have a serious emotional or mental health needs and are currently or have previously been served in the Healthy Transitions Initiative or Wraparound program. A youth peer specialist is not only a person who has lived the experience of a serious emotional or mental health need, but also has had formal training in the peer specialist model of mental health and related supports. They use their unique set of recovery/resiliency and mental health experience in the Healthy Transitions Initiative or Wraparound Milwaukee in combination with solid skills training to support peers who are facing similar challenges and issues.

The goal of this service is to develop a curriculum to prepare young adults with the knowledge, skills and confidence to be peer specialists, including preparing them to take and pass the Wisconsin State Peer Specialist Certification examination. State certification is critical to them being eligible for third-party reimbursement from Medicaid.

The curriculum should include topics related specifically to the defined population of young adults as well as curriculum materials that will be necessary for the peer specialist applicant to pass the certification exam. These required competencies will include:

- Understanding recovery/resiliency
- Understanding the positive and negative impact of life events such as sexuality, grief and loss, stigma and trauma
- Understanding person-centered planning
- Understanding empowerment and self-advocacy
- Problem solving and conflict resolution techniques
- Cultural awareness
- Fundamental knowledge of the mental health and substance abuse systems in Wisconsin
- Fundamental knowledge of mental health conditions, treatments and services
- Identifying and accessing community services and supports with emphasis on age appropriate services
- Understanding and maintaining confidentiality and appropriate boundaries
- Recognizing when to seek guidance and support for other peers
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<tr>
<td>Youth Relationship Building-A.S.A.P.</td>
<td>25</td>
<td></td>
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As part of the Alternatives to Sexual Assault Program (A.S.A.P.), an eight-week module is provided to introduce youth referred to the program to the building blocks of healthy relationships. The module is based on a curriculum developed by an organization called Think Marriage. The relationship-building module is a part of the A.S.A.P. treatment program and the youth are required to attend.

A.S.A.P. Healthy Relationships sessions will include the following topics:
- Sexually Transmitted Disease
- Adolescent Development and Relationships
- Developing Friendships First
- Dating as an Adolescent
- Learning About Unhealthy Relationships
- How to Build a Healthy Relationship
- Media, Pornography and Manipulation
- Empowerment and Making Personal Positive Choices

**Credentials:** Providers must have successfully completed Think Marriage training and maintain up-to-date participation in ongoing refresher trainings conducted by
Think Marriage staff. All providers must have up-to-date background checks on file with the parent agency. Wraparound Milwaukee reserves the right to limit number of vendors providing this service to those directly trained by Think marriage and with review and final approval of all providers by the Wraparound Provider Network or other Wraparound Milwaukee designee.