



# INTEGRATED PROVIDER NETWORK

## SERVICE DESCRIPTION LIST

Service Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5202 H2021	After School Programs Community-based wraparound services		12.00	Hour
	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.			

*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 kept 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.

Service	Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5565B T2019	Anger Management Group Therapeutic behavioral services	<p>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).</p> <p>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.</p> <p>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 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.</p> <p>The Anger Management curriculum must include components that are designed to address the following elements:</p> <ol style="list-style-type: none"> <li>1)awareness of one’s own emotional and physical states when they are angry</li> <li>2)the ability to understand the perspective of others</li> <li>3)recognizing and using appropriate verbal and non-verbal communication skills</li> <li>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.)</li> <li>5)understanding choices and consequences</li> <li>6)training in problem-solving skills and coping strategies including: <ul style="list-style-type: none"> <li>· identifying the problem</li> <li>· generating alternative solutions</li> <li>· considering the consequences of each solution</li> <li>· selecting an effective response to the situation</li> <li>· evaluating outcomes of that response</li> </ul> </li> </ol>	7.50		Quarter Hour

Service			Set IPN	Avg IPN	Billing Unit
Name / ID			Rate	Rate	
<ul style="list-style-type: none"> <li>· identifying socially acceptable ways to release and manage aggression</li> <li>7)basic relaxation techniques.</li> <li>8)effects of alcohol and other drugs have on behavior/anger management</li> </ul> <p>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).</p>					
<p><i>Credentials:</i>      Credentialing Requirements</p> <p>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.</p>					
5001 H0001	AODA Assessment Alcohol and/or drug assessment	Initial assessment to evaluate the need for AODA treatment services.	25.00		Quarter Hour
<p><i>Credentials:</i>      AODA outpatient clinic license and:</p> <ul style="list-style-type: none"> <li>-Clinical Substance Abuse Counselor Certification or above OR</li> <li>-MS Degree with documented 3,000+ hours of work experience preferably in a setting dealing with AODA issues OR</li> <li>-Ph.D., utilizing recognized AODA assessment tools.</li> </ul> <p>All providers of service must have a National Provider Identifier (NPI).</p>					
5173 H2020	AODA Day Services Therapeutic behavioral services	Day services for an adult/family caregiver focusing on AODA issues and treatment.		60.00	Daily
<p><i>Credentials:</i>      A DHFS-CSAS (Community Substance Abuse Services) Day Treatment Certificate must be submitted in the provider application process.</p>					
5349 H0009	AODA Detoxification Alcohol and/or drug services, acute detox	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.		240.00	Daily

Service	Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
<i>Credentials:</i> AODA Detox Certificate (DHFS Certificate-HFS 61.56)				
5121 H0005	AODA Group Counseling Alcohol and/or drug svcs; grp couns.	8.00		Quarter Hour
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.				
<i>Credentials:</i> 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).				
5101 H0022	AODA Individual/Family Counseling Alcohol and/or drug intervention svc	16.00		Quarter Hour
Individual/family counseling related to AODA issues provided in a licensed Community Substance Abuse Services Clinic (CSAS) or Outpatient Mental Health Clinic under DHS 75 guidelines.				

Service	Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
<i>Credentials:</i>	<p>AODA outpatient clinic license and:</p> <ul style="list-style-type: none"> <li>-Substance Abuse Counselor Certification or above</li> <li>-Substance Abuse Counselor-In-Training certification with clinical supervisor authorization to provide counseling after one of the following requirements has been met: <ul style="list-style-type: none"> <li>-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</li> <li>-If an RADCI (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.</li> </ul> </li> </ul> <p>All providers of service must have a National Provider Identifier (NPI).</p>			
5103 H0003	AODA Lab and Medical Services Alcohol and/or drug screening, lab analysis	Random urine surveillance and other substance abuse screening and monitoring by an approved lab.	1.00	Dollar
<i>Credentials:</i>	Laboratory certification and per unit rate.			
5348 H0018	AODA Resid. Treat-With Child Behavioral health, short-term residential	Same as AODA Residential Treatment (Service Code 5347), except with up to four children under age of 10.	140.00	Daily
<i>Credentials:</i>	Community Based Residential Facility License			
5347 H0018	AODA Residential Behavioral health, short-term residential	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.)	85.00	Daily
<i>Credentials:</i>	Community Based Residential Facility License			

<b>Service Name / ID</b>		<b>Set IPN Rate</b>	<b>Avg IPN Rate</b>	<b>Billing Unit</b>
5182A T1001	Assessment Svcs-Nursing Nursing assessment/eval		64.00	Session
	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 of the effects of medication prescribed by a M.D. would also be within this area. Includes In-Home Health Care.)			
<i>Credentials:</i>	R.N. License.All providers of this service must have a National Provider Identifier (NPI).			
5000A 99205,9 9215	Assessments-M.D. Office or other outpatient visit		200.00	Session
	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.			
<i>Credentials:</i>	M.D. License.			
	Effective 1/1/2007, providers of this services must have a National Provider Identifier (NPI).			
6001	Audit Recoveries			Dollar
	Service description used to track financial recoupments as the result of vendor audits. This service code began 7/1/05; prior to that, audit recoveries were entered under Service Code 6000-Administrative Fees, and were coded at the provider level that it was a recovery.			
<i>Credentials:</i>				
5551	BRICK Program		55.00	Session
	Wisconsin Green Bay Correctional facility "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 Coorectional Institution, supervision of youth participating in the half day BRICK Program, lunch, youth discussion regarding their response to the program and completion of a "client satisfaction survey". 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.			

Service	Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
5551	BRICK Program	55.00		Session
<p>Wisconsin Green Bay Correctional facility "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 Coorectional Institution, supervision of youth participating in the half day BRICK Program, lunch, youth discussion regarding their response to the program and completion of a "client satisfaction survey". 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.</p>				
<i>Credentials:</i>	<p>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.</p>			
<p>Valid Wisconsin Drivers License (Drivers Abstract on file with agency)</p>				
<p>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.</p>				
<p>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.</p>				
<ul style="list-style-type: none"> <li>·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:</li> <li>·Crisis regulations.</li> <li>·Wraparound crisis intervention policies and procedures and</li> <li>·Specific requirements associated with this service.</li> <li>·Wisconsin state statues and administrative rules related to patient rights and confidentiality of youth records.</li> <li>·Basic mental health intervention techniques applicable to crisis situations.</li> <li>·Techniques for assessing and responding to persons with emergency mental health needs who are experience a crisis or AODA related problems.</li> </ul>				

Service	Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5201 T2037	Camp Therapeutic camping	<p>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:</p>	1.00		Total
<ol style="list-style-type: none"> <li>1. Title or name of the “Camp” (here after referred to as “camp” or “program”).</li> <li>2. Proposed daily rate for the program.</li> <li>3. Location(s) where the camp/program will take place.</li> <li>4. Dates and time of day the camp will be conducted.</li> <li>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).</li> <li>6. Minimum client to staff ratio.</li> <li>7. Description of appropriate participants including: age, gender, challenges enrolled youth might be experiencing (ie: lack self confidence; excessively shy, etc.).</li> <li>8. Skills / abilities the youth will acquire as a result of participation in the specific camp/program.</li> <li>9. Minimum requirements for youth participation in the program.</li> <li>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.</li> <li>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.</li> <li>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).</li> <li>13. Participant conduct that could result in participant expulsion from the program.</li> <li>14. Transportation options (to and from program).</li> <li>15. Agency contact information for referrals</li> <li>16. Agency contact information during the program implementation (including: how families may contact participants in the event of an emergency).</li> </ol>					
<p>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.</p>					



Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	
<p>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.</p>			
<p>Overnight stays not allowed. Out-of-county travel requires Wraparound Administration approval IN ADVANCE.</p>			
<p>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.</p>			
<p>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.</p>			
<p>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.</p>			
<p>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.</p>			
<p>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</p>			

Service Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5500A T2022	Care Coordination-Daily Case Management	<p>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.</p> <p>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.</p> <p>UNTIL FURTHER NOTICE, WRAPAROUND MILWAUKEE IS NOT UTILIZING ANY ADDITIONAL CARE COORDINATION AGENCIES.</p>	22.50	Daily
5502B T2022	Case Mgmt-Waiver Program Case management	Same as 5502A-but for waiver program slots	2.82	2.82

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

*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.

Service	Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
<i>Credentials:</i>	Same as 5502A-but for waiver program slots			
5441 S2027	Child Care (Hourly) Specialized child care		6.00	Hour
	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.			
<i>Credentials:</i>	Day Care License			
5589	Commodity - Emergency Food Purchas			Dollar
	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 to 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 SHARE Authorization will identify the client name and maximum purchase amount for the identified month. The family must present the original copy of the Wraparound Milwaukee "SHARE Authorization" at the SHARE Express sale in order to receive services. SHARE Wisconsin will keep the original copy of the "SHARE Authorization" which is then used by SHARE Wisconsin to bill Wraparound Milwaukee for the exact amount of the grocery purchase up to the total dollar amount authorized by the Care Coordinator. Each authorization is good for one day only during the authorized month. Authorizations that have been modified or tampered with will not be accepted.			
<i>Credentials:</i>	Limited to SHARE Wisconsin - EXPRESS sale sites.			
5588 S5199	Commodity-Food (with perishables) Personal Care Items, NOS		\$25.00	Each
	Perishable and non-perishable and nutritionally balanced Family Pack containing various items of food.			
<i>Credentials:</i>				

<b>Service Name / ID</b>		<b>Set IPN Rate</b>	<b>Avg IPN Rate</b>	<b>Billing Unit</b>
7999	Court/Bureau Access			Each
<p>This service code is used solely for the purpose of populating the drop-down boxes for Probation and Bureau Staff on the Court Info Screen.</p> <p><i>Credentials:</i></p>				
5300 S9485	Crisis Bed-Foster Home Crisis intervention mental health svc		60.00	Daily
<p>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 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 30 days.</p> <p><i>Credentials:</i> Foster Home License</p>				
5302 S9485	Crisis Bed-Group Home Crisis intervention mental health svc		90.00	Daily
<p>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.</p> <p><i>Credentials:</i> Group Home License</p>				
5414 S9485	Crisis Respite and Nursery Crisis intervention mental health svc		100.00	Daily
<p>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.</p> <p><i>Credentials:</i> Shelter License</p>				
5299 S9485	Crisis Runaway Shelter Crisis intervention mental health svc, per diem		105.00	Daily
<p>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.</p> <p><i>Credentials:</i> Agencies providing crisis runaway shelter must be licensed under the State of Wisconsin as a Child Placing Agency and Group Home.</p>				

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5303 Crisis Stabilization/Supervision S9484, Crisis intervention, mental health U7	<p>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.</p> <p>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.</p> <p>Appropriate Crisis 1:1 interventions may include:</p> <ul style="list-style-type: none"> <li>·Providing 1:1 counseling and support.</li> <li>·Providing crisis related transportation as needed.</li> <li>·Implementing strategies identified in the crisis plan.</li> <li>·Removing the youth from stressful situations ie: take child to an activity to reduce stress.</li> <li>·Providing information and feedback to the Mobile Crisis Team and Child and Family Team.</li> <li>·Documenting and writing reports.</li> <li>·Attending Plan of Care, Child and Family Team and other team meetings.</li> </ul> <p>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.</p>	27.50		Hour

Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	

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

Service Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
<i>Credentials:</i>			
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:			
<ul style="list-style-type: none"> <li>·Crisis regulations.</li> <li>·Wraparound crisis intervention policies and procedures and</li> <li>·Provider job responsibilities.</li> <li>·Relevant state statues and administrative rules including patient rights and confidentiality of youth records.</li> <li>·Basic mental health and psychopharmacology concepts applicable to crisis situations.</li> <li>·Techniques for assessing and responding to persons with emergency mental health needs who are suicidal and/or are experiencing AODA related problems.</li> </ul>			
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.)			

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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.)				
5562 H2014	Daily Living Skills-Group Skills training & development	16.00		Hour
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.				
<ol style="list-style-type: none"> <li>1. Basic self-care, grooming and hygiene</li> <li>2. Appropriate medication management and storage.</li> <li>3. Use of a telephone and basic communication skills including accessing emergency police, fire and medical assistance</li> <li>4. Nutrition, meal planning and preparation. Including general cooking skills and use of conventional stove/oven and microwave oven.</li> <li>5. Purchase and proper/safe storage of food, household supplies and chemicals.</li> <li>6. Household maintenance ie: making a bed; laundry skills; vacuuming and dusting; proper cleaning for kitchen and bathroom facilities; trash removal and recycling.</li> <li>7. Laundry and basic mending skills for clothing/bedding.</li> </ol>				
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.				
		15.00		



Service	Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
<i>Credentials:</i>	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.			
5561 H2014	Daily Living Skills-Individual Skills training & development	30.00	Hour	Daily Living Skills Individual provides support, training and skill development on an individual (1:1) basis for 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.
				<ol style="list-style-type: none"> <li>1. Basic self-care, grooming and hygiene</li> <li>2. Appropriate medication management and storage.</li> <li>3. Use of a telephone and basic communication skills including accessing emergency police, fire and medical assistance</li> <li>4. Nutrition, meal planning and preparation. Including general cooking skills and use of conventional stove/oven and microwave oven.</li> <li>5. Purchase and proper/safe storage of food, household supplies and chemicals.</li> <li>6. Household maintenance ie: making a bed; laundry skills; vacuuming and dusting; proper cleaning for kitchen and bathroom facilities; trash removal and recycling.</li> <li>7. Laundry and basic mending skills for clothing/bedding.</li> </ol>
				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.
		32.00		
<i>Credentials:</i>	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.			

Service Name / ID			Set IPN Rate	Avg IPN Rate	Billing Unit
5170 H0025	Day Treatment Behavioral health prevent/educ svc	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.	72.00		Daily
<i>Credentials:</i>		An Outpatient Mental Health License, Department of Public Instruction License, or Child Care Institution License must be submitted in the application process.			
5172 H2012	Day Treatment (Medicaid-day) Mental health partial hosp & treatment	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. 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.	112.00		Daily
<i>Credentials:</i>		Mental Health Day Treatment License. Agency National Provider Identifier (NPI).			
5176 H0040	Day Treatment - Summer School Rate Community Treatment Program	Same service description as day treatment, except the rate is reduced as the school day is short during summer school.			Daily
<i>Credentials:</i>					
5174 H0040	Day Treatment Specialized (Non-Medi Assertive community treatment prog	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.		85.00	Daily
<i>Credentials:</i>		Day Treatment License. Agency National Provider Identifier (NPI).			

Service Name / ID			Set IPN Rate	Avg IPN Rate	Billing Unit
5580 T1999	Discretionary Funds 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.)	1.00		Total
<i>Credentials:</i>					
5308 H0041	Enhanced Foster Care-Level 2 Foster care, child, non-therapeutic	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.	75.45		Daily
<i>Credentials:</i> Child Placing Agency License					
5309 H0041	Exceptional Foster Care-Level 4 Foster care, child, non-therapeutic	For St. Aemilian-Only: 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.	118.32		Daily
<i>Credentials:</i> Child Placing Agency License					

Service	Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5701 H0041	Family Connections Groups Foster care, child, non-therapeutic	<p>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.</p> <p>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.</p> <p>Session include training in the following areas:</p> <ul style="list-style-type: none"> <li>· social skills</li> <li>· refusal skills</li> <li>· increasing self-awareness</li> <li>· expression of feelings</li> <li>· interpersonal communication</li> <li>· self-disclosure</li> </ul> <p>Parent Modules (5 sessions each): Developing Positive Parental Influences Raising Resilient Youth</p> <p>Youth Modules (5 sessions each): Developing a Positive Response Developing Independence and Responsibility</p> <p>Joint Module Getting Real - Communications Training (day-long retreat)</p>	35.00		Hour
<p><i>Credentials:</i> 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.</p>					

Service Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5566 H0015	Family Works Program Alcohol and/or drug svcs intensive outpt		25.00	Daily
	<p>Family Works is an intensive treatment program bringing Meta House's Gender Responsive Residential Treatment philosophy to an outpatient setting. The program includes life, parenting and job skills development and comprehensive case management. Meta House Case Managers work with the staffs of the W-2 and child welfare agencies to assist women to meet the requirements of both systems, while receiving the necessary treatment and support for their ongoing recovery. Included in 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.</p> <p>This sole-provider service must be pre-authorized by the program authority.</p>			

*Credentials:*

5166 H0015	Female Family Systems Intervention Alcohol and/or drug svcs intensive outpt		35.00	Hour
	<p>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.</p> <p>The program consists of five modules:</p> <ol style="list-style-type: none"> <li>1. Building Trust</li> <li>2. Family Structure and Communication (sessions 2 and 3)</li> <li>3. Risk Reduction (sessions 4 and 5)</li> <li>4. Building A Future</li> <li>5. Maintaining Strong Family Ties (sessions 7 and 8)</li> </ol> <p>Families who complete the program receive post program follow-up at 1, 4 and 9 months following completion of the program.</p>			

Service Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5166 H0015	Female Family Systems Intervention Alcohol and/or drug svcs intensive outpt		35.00	Hour
	<p>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.</p> <p>The program consists of five modules:</p> <ol style="list-style-type: none"> <li>1. Building Trust</li> <li>2. Family Structure and Communication (sessions 2 and 3)</li> <li>3. Risk Reduction (sessions 4 and 5)</li> <li>4. Building A Future</li> <li>5. Maintaining Strong Family Ties (sessions 7 and 8)</li> </ol> <p>Families who complete the program receive post program follow-up at 1, 4 and 9 months following completion of the program.</p> <p><i>Credentials:</i> 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.</p> <p>Bachelors degree or above in a healthcare or related field.</p> <p>Resume substantiating education and experience working with youth and families.</p> <p>Copies of Degree and resume must be submitted prior to approval in the Network.</p>			
5390 H0041	Foster Home Care Foster care, child, non-therapeutic		27.00	Daily
	<p>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.)</p> <p><i>Credentials:</i> Foster Home License</p>			
5393 H1011	Foster Home Licensing Family Assessment by Lic. Beh. Health Prof..		2500.00	Each
	To provide foster care recruitment and licensing.			

Service Name / ID			Set IPN Rate	Avg IPN Rate	Billing Unit
<i>Credentials:</i> Child Agency Placing License					
5389 H1011	Foster Home Maintenance Family Assessment by Lic Beh Health Prof	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.	42.50		Hour
<i>Credentials:</i> Child Agency Placing License					
5120 H2019	Group Counseling and Therapy Therapeutic Behavioral Services	NOTE: 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.	8.00		Quarter Hour
H2019, 90853					
<i>Credentials:</i>	The therapist conducting the group must meet the same requirements as under 5100. An Outpatient mental health clinic license must be presented in the application process. A psychiatrist/psychologist or licensed psychotherapist as defined in 5100 must be part of the practice for consultation and review of cases.				
Providers of this services must have a National Provider Identifier (NPI).					
5400 H0040	Group Home Care Assertive community treatment program	A licensed group home providing care and 24-hour supervision as an alternative living situation for children who temporarily cannot live with their families.		180.00	Daily

Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	
<p><i>Credentials:</i> 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.</p>			
<p>A description of the treatment/activities provided in the group home must be provided in the application process.</p>			
<p>All group homes in the Wraparound Provider Network must meet Wisconsin Medicaid requirements as a crisis stabilization provider regarding staffing, documentation and supervision.</p>			
<p>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.</p>			
<p>Group homes must document daily progress notes relevant to their provision of mental health crisis services.</p>			
<p>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:</p>			
<ul style="list-style-type: none"> <li>a) Volunteers shall be supervised by an employee who qualifies under (3)(b) 1-8.</li> <li>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.</li> <li>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.</li> <li>d) Day to day clinical supervision and consultation shall be provided by a mental health professional qualified under (3)(b) 1-8.</li> <li>e) All clinical supervision shall be documented, and this documentation shall be maintained on site.</li> <li>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.</li> <li>g) Group homes shall provide a least 8 hours of training to regular staff, per year, and keep documentation of this training.</li> </ul>			



Service	Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5403 S9484	Group Home Crisis Supervision Crisis Intervention Mental Health Services	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.			Hour
<i>Credentials:</i> The required credentials are a Masters level, 3000+ hour clinician with experience in working with DD and SED children.					
5402 H0037	Group Home-Specialized Community psychiatric supportive tx program	Only for specialized needs: teens with babies, developmentally disabled or youth with cognitive impairments.		160.00	Daily

Service	Set IPN	Avg IPN	Billing Unit	
Name / ID	Rate	Rate		
<i>Credentials:</i>	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:			
	<ul style="list-style-type: none"> <li>a) Volunteers shall be supervised by an employee who qualifies under (3)(b) 1-8.</li> <li>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.</li> <li>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.</li> <li>d) Day to day clinical supervision and consultation shall be provided by a mental health professional qualified under (3)(b) 1-8.</li> <li>e) All clinical supervision shall be documented, and this documentation shall be maintained on site.</li> <li>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.</li> <li>g) Group homes shall provide a least 8 hours of training to regular staff, per year, and keep documentation of this training.</li> </ul>			
5132 H0004	High Risk Counseling and Therapy Behavioral Health Counseling & Therapy	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.	18.00	Quarter Hour

Service	Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
<i>Credentials:</i>	<p>Credentials: Service providers must be licensed and have documented two years (full time equivalent) prior experience working with the target population.</p> <p>Resume of past experience with target population category along with psychotherapist license in one of the following:</p> <ul style="list-style-type: none"> <li>Clinical Psychologist-Ph.D.</li> <li>Marriage and Family Therapist</li> <li>Professional Counselor</li> <li>Clinical Social Worker</li> <li>Music Therapist</li> <li>Art Therapist</li> <li>Dance Therapist</li> </ul> <p>Psychotherapist License must be presented in the application process along with documented history of two years experience in the target population.</p> <p>Providers of this services must have a National Provider Identifier (NPI).</p> <p>Applications are subject to review and approval by the Wraparound High Risk Management staff.</p>			
5163 H2033	Home-Based Behavioral Mgm-Aide Multi-Systemic Therapy for Juveniles	30.00		Hour
	<p>As part of the Home-Based Management Team and under the direction of the Home-Based Behavioral Management Clinical Lead, the Home-Based Behavioral Management Aide will assist the client and family with tasks related to the client's daily living, behavior management, and self-care needs.</p> <p>NOTE: The Home-Based Behavioral Management Team may include the Home-Based Behavioral Management Clinical Lead and the Home-Based Behavioral Management Technician or the Home-Based Behavioral Management Aide.</p>			
<i>Credentials:</i>	<p>Two years of experience in a residential setting, which may include group home, residential care center, shelter, or rehab center, serving children, adolescents or young adults. At least one year of experience must be with Developmentally Disabled clients.</p> <p>Educational requirement: High School Diploma. Agency must keep a copy of the diploma on file.</p>			
5163 H2033	Home-Based Behavioral Mgm-Lead Multi-systemic therapy for juveniles	70.00		Hour
<i>Credentials:</i>	<p>The required credentials are a Masters level clinician with one year experience working with Developmentally Disabled clients. This clinician will assess needs of youth and family to develop a behavioral treatment plan in coordination with the Plan of Care and IEP and supervise the Behavioral Management Technician. Copies of Masters Degree and documentation of one year of experience working with the Developmentally Disabled population must be submitted prior to approval in the Network.</p>			

<b>Service Name / ID</b>		<b>Set IPN Rate</b>	<b>Avg IPN Rate</b>	<b>Billing Unit</b>
5164 H2033	Home-Based Behavioral Mgm-Technic Multi-systemic therapy for juveniles		50.00	Hour
	<p>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.</p> <p>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).</p> <p><i>Credentials:</i> 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.</p> <p>Providers of this service must submit copies of a human service degree and verification of 6 months of experience working with the Developmentally Disabled population prior to approval in the Network.</p>			
5590 S5130	House Mgmt Services Homemaker services NOS		23.00	Hour
	<p>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.</p> <p><i>Credentials:</i> High School Diploma or G.E.D. Basic math and money management skills; physical ability to assist in cleaning/basic household chores.</p> <p>NOTE: Do NOT need to submit copy of H.S. Diploma or G.E.D. Certificate to Wraparound (Maintain in agency file only.)</p>			
5595 H2015	Housing Assistance Comprehensive comm support svcs		25.00	Hour
	<p>Assisting families to locate and secure affordable and safe housing as needed, including obtaining or providing housing referral services, identifying relocation needs, mediating disputes with landlord, and other identified housing needs.</p> <p><i>Credentials:</i> High School Diploma or G.E.D. Familiarity with basic lease agreements. Knowledge of subsidized housing programs that offer housing assistance and low income housing such as the City of Milwaukee Housing Authority.</p> <p>NOTE: Do NOT need to submit copy of H.S. Diploma or G.E.D. Certificate to Wraparound (Maintain in agency file only.)</p>			

Service Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5161 H2033	In-Home Case Aide Multi-systemic therapy for juveniles		30.00	Hour
	<p>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).</p> <p>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.)</p>			

*Credentials:*

**CREDENTIALS**

The In-Home Aide must possess one of the following credentials:

(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.

Service	Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5160 H2033	In-Home Lead Medicaid Multi-systemic therapy for juveniles	<p>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 (notwithstanding that appropriate clinical interventions such as play therapy may be employed). Intensive In-home therapy is generally a "family all" multi-systemic focused service, although individual or family counseling/psychotherapy sessions are permissible. Identified needs, measurable goals and the intensity of treatment should be consistent with the youth/family plan of care. (See Wraparound In-Home Policy for more information.)</p>	60.00		Hour

Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	

*Credentials:*

**CREDENTIALS**

Individuals with the appropriate credentials as outlined below may provide In-Home Lead services for the Wraparound and FISS Programs.

Providers of this service must have a National Provider Identifier (NPI).

(1) Licensed Professionals Practicing Privately or in a Certified Clinic. These licensed psychotherapists may practice privately (without an affiliation to a Certified Mental Health Clinic).

- Licensed Clinical Social Worker
- Licensed Marriage And Family Therapist
- Licensed Professional Counselor, Licensed Music, Art And Dance Therapists
- Licensed Psychologist
- Psychiatrist.

(2) Certified Professionals Practicing Privately (with Supervision)

or in a Certified Clinic

Individuals with certification to provide psychotherapy with supervision as follows:

Advance Practice Social Worker

or

Independent Social Worker

Under the supervision of:

1. An individual licensed as a clinical social worker with a doctorate degree in social work.
2. An individual licensed as a clinical social worker with the equivalent of 5 years of full-time clinical social work experience.
3. A psychiatrist or a psychologist licensed under ch. 455 of the Wisconsin State Statutes.
4. An individual, other than an individual specified in 1,2, or 3 above, who is approved by the social work section of the examining board.

Certified Professional Counselor in Training with supervision as approved by the State of Wisconsin Department of Regulation and Licensing.

(3) Other Qualified Professionals in a Certified Outpatient Psychotherapy Clinic

Psychotherapy services may also be provided by other qualified professional staff in a Certified Outpatient Psychotherapy Clinic.

Other qualified professional staff are clinicians with a master's degree and course work in areas directly related to providing mental health services including: social work, clinical psychology, psychology, school psychology, counseling and guidance, counseling psychology or a registered nurse with a masters degree in psychiatric mental health nursing or community mental health nursing and 3,000 hours of supervised experience in a clinical practice.(See below for specific documentation requirements.)

**DOCUMENTATION REQUIREMENTS**

During the application process, agencies/individuals shall submit a copy of one of the following: State of Wisconsin License or Certification as described above.

Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	
<p>or  Letter from the Program Certification Unit of the State of Wisconsin Bureau of Quality Assurance verifying attainment of 3,000 clinical hours and status as a psychotherapist to provide services under supervision in a Certified Mental Health Clinic</p> <p>or  EDS letter verifying a Provider's Billing Status as a Master's Level Psychotherapist in a Certified Mental Health Clinic</p> <p>License of supervisory agent and resume, as applicable under (2) above.</p>			
Copy of Outpatient Clinic License as needed for master's level clinicians working in an Outpatient Psychotherapy Clinic (if not already on file).			

5168 H2011	In-Home Technician Multi-systemic therapy for juveniles	The In-Home Technician is always the second person on a two-person team. A Medicaid reimbursable Lead Therapist (see code 5160) must provide oversights and supervision as needed for services provided by the In-Home Technician. (The Technician and Lead Therapist must be from the same agency).	40.00	Hour
		<p>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 in the home, school and community, 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. As identified in the youth/family plan of care, a portion of time that the In-Home technician spends with the family may focus on skill development with individual or multiple family members.</p>		



Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	
<i>Credentials:</i>			
<p>The In-Home technician credential requirements are as follows:</p> <p>(1) A BA/BS Degree in occupational therapy, with State of Wisconsin Certification as an Occupational Therapist and at least 6 months supervised clinical experience working in a program whose primary clients are emotionally and behaviorally disturbed youth and their families;</p> <p>(2) Registered nurse with at least 6 months supervised clinical experience working in a program whose primary clients are emotionally and behaviorally disturbed youth and their families;</p> <p>or</p> <p>(3) Masters degree in psychology, social work or mental health/community counseling and at least 6 months supervised clinical experience working in a program whose primary clients are emotionally and behaviorally disturbed youth and their families.</p>			
<p>For purposes of this service, clinical experience is meant "post graduate" experience, not to include internships or field placements.</p>			
<p>Verification of education and clinical experience required.</p>			

Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	
5569 Independent Living Skills Training	Varies	79.00	Daily
<p>Independent Living Skill Training ages 16 and older who need to develop the skills to live independently. This service is appropriate for youth who will be moving into independent living arranged for through SAIL or the Adult Housing Program and youth participating in Supported Independent Living through Wraparound Milwaukee. Independent Living Skills Training differs from Supported Independent Living, as there is no component associated with the acquisition of housing or supervision of youth at their place of residence. Transportation is the responsibility of the referring agency.</p>			
<p>Independently Living Training is an intensive (6 hr/day), short-term program with a structured curriculum that addresses the development of skills needed for independent living and obtaining sustainable employment. The curriculum is designed to promote skill development in the following areas:</p>			
<ul style="list-style-type: none"> <li>- Setting Up Living Quarters</li> <li>- Meal Preparation (Nutrition/Meal Planning; Meal Preparation and Clean Up; Food Storage)</li> <li>- Money Management (Budgeting/Savings/Spending/Credit; Bank Account Setup and Management; Pay Check Deductions; Paying Taxes)</li> <li>- Home Management and Safety</li> <li>- Insurance Coverage /Health and Property</li> <li>- Transportation</li> <li>- Community Resources (food, assistance, health care)</li> <li>- Career Goals and Planning</li> <li>- Communications Skills (particularly in the job setting)</li> <li>- Job Training (with minimum wage payment)</li> <li>- How to Find Employment/Housing</li> </ul>			
<p>Youth appropriate for this services would:</p> <ul style="list-style-type: none"> <li>- At least 16 year of age</li> <li>- Have an IQ of 70 or above</li> <li>- Be independent in daily self-care activities</li> <li>- Be in need of skill training associated with living on their own and obtaining employment</li> <li>- Be capable of managing their own living quarters</li> <li>- Be capable of taking public transportation (ie: city bus)</li> <li>- 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</li> </ul>			

Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	
<p>birthday</p> <ul style="list-style-type: none"> <li>- Be able to participate in programming 6 hours a day, Monday through Friday</li> </ul> <p>The following services would NOT be able to be provided in conjunction with Independent Living Skills Training:</p> <ul style="list-style-type: none"> <li>- Residential Care</li> <li>- Group Home or Foster Home Care (unless approved by Wraparound Administration)</li> <li>- Day Treatment</li> <li>- Daily Living Skills Training</li> <li>- Life Skills Training</li> <li>- Parent Assistance</li> <li>- Job Coach</li> <li>- Supported Wk Envir/Job Coach.</li> </ul> <p>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.</p>			
<p><i>Credentials:</i> 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.</p>			
<p>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.</p>			
<p>5100 Individual/Family Therapy-Office Base H0004 Behavioral health couns &amp; therapy</p>	<p>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.</p>	16.00	Quarter Hour

Service			Set IPN	Avg IPN	Billing Unit
Name / ID			Rate	Rate	
5100 H0004 OR 90804 to 90815 Unit Coversi on Require d	Individual/Family Therapy-Office Base Behavioral health couns & 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.	16.00		Quarter Hour

Service Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
<i>Credentials:</i>	Individuals with the appropriate credentials as outlined below may provide Individual/Family Therapy services for the Wraparound and FISS Programs.			
	Providers of this services must have a NPI Number.			
	(1) Licensed Professionals Practicing Privately or in a Certified Clinic			
	These licensed psychotherapists may practice privately (without an affiliation to a Certified Mental Health Clinic). Licensed Clinical Social Worker; Licensed Marriage and Family Therapist; Licensed Professional Counselor; Licensed Music, Art And Dance Therapists; Licensed Psychologist; Psychiatrist.			
	(2) Certified Professionals Practicing Privately (with Supervision) or in a Certified Clinic			
	Individuals with certification to provide psychotherapy with supervision as follows:			
	Advance Practice Social Worker			
	or			
	Independent Social Worker			
	Under the supervision of:			
	(1) An individual licensed as a clinical social worker with a doctorate degree in social work.			
	(2) An individual licensed as a clinical social worker with the equivalent of 5 years of full-time clinical social work experience.			
	(3) A psychiatrist or a psychologist licensed under ch. 455 of the Wisconsin State Statues.			
	(4) An individual, other than an individual specified in 1,2, or 3 above, who is approved by the social work section of the examining board.			
	Certified Professional Counselor in Training with supervision as approved by the State of Wisconsin Department of Regulation and Licensing.			
	(3) Other Qualified Professionals in a Certified Outpatient Psychotherapy Clinic			
	Psychotherapy services may also be provided by other qualified professional staff in a Certified Outpatient Psychotherapy Clinic.			
	Other qualified professional staff are clinicians with a master's degree and course work in areas directly related to providing mental health services including: social work, clinical psychology, psychology, school psychology, counseling and guidance, counseling psychology or a registered nurse with a masters degree in psychiatric mental health nursing or community mental health nursing and 3,000 hours of supervised experience in a clinical practice.(See below for specific documentation requirements.)			
	<b>DOCUMENTATION REQUIREMENTS</b>			
	During the application process, agencies/individuals shall submit a copy of one of the following:			
	State of Wisconsin License or Certification as described above.			
	or			
	Letter from the Program Certification Unit of the State of Wisconsin Bureau of Quality Assurance verifying attainment of 3,000 clinical hours and status as a psychotherapist to provide services under supervision in a Certified Mental Health Clinic			

Service Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
<p>or EDS letter verifying a Provider's Billing Status as a Master's Level Psychotherapist in a Certified Mental Health Clinic</p>			
<p>License of supervisory agent and resume, as applicable under (2) above.</p>			
<p>Copy of Outpatient Clinic License as needed for master's level clinicians working in an Outpatient Psychotherapy Clinic (if not already on file).</p>			
<p>5111A Individual/Family Therapy-Ph.D.-Office 90804-9 Insight oriented or interactive 0815 psychotherapy</p>	<p>100.00</p>		<p>Session</p>
<p>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 officed-based setting.</p>			
<p><i>Credentials:</i> State of Wisconsin Psychologist License</p>			
<p>DOCUMENTATION REQUIREMENTS</p>			
<p>During the application process, agencies/individuals shall submit a copy of the current State of Wisconsin Psychologist License. Providers of this services must have a National Provider Identifier (NPI).</p>			
<p>5600 Interpreters T1013 Sign language or oral interpretive svcs</p>		<p>40.00</p>	<p>Hour</p>
<p>Interpretive services provided to the child/family - may be bi-lingual, hearing impaired, or other.</p>			
<p><i>Credentials:</i> Two agency letters of reference.</p>			

Service Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
5556 Job Internship S2023 Supported employment	5.75		Hour
<p>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.</p> <p>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.</p> <p>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.</p>			

*Credentials:*

5392 Kinship Care H0041 Foster care, child, non-therapeutic	7.00		Daily
<p>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.</p>			

*Credentials:*

Service	Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5563C H2014	Life Skills Training - Group Skills training & development	<p>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.</p> <p>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.</p> <p>In addition to goal setting activities, training in the following areas it to be provided based on the client's skills, needs and interests.</p> <ol style="list-style-type: none"> <li>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).</li> <li>2. Recognizing a bargain / comparison-shopping.</li> <li>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.</li> <li>4. Use of public transportation.</li> <li>5. How to find a vocational training program (including finding financial assistance).</li> <li>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.)</li> <li>7. Obtaining medical care, choosing a doctor or dentist.</li> </ol>	16.00		Hour



Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	
<p>8. Basic information about caring for a pet (nutrition, proper discipline, veterinary services).</p> <p>9. Entertaining guests.</p> <p>10. Developing hobbies and leisure interests.</p> <p>11. Conflict resolution training.</p> <p>12. Use of community resources - emergency and non-emergency (food pantries, shelters, medical, financial).</p> <p>Providers of Life Skills Training are encouraged to develop a certificate or awards component as an incentive to clients who successfully complete the training</p> <p>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.</p>			
<i>Credentials:</i>	<p>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.</p>		

Service Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5563B H2014	Life Skills Training - Individual Skills training & development	32.00		Hour
<p>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.</p> <p>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.</p> <p>In addition to goal setting activities, training in the following areas it to be provided based on the client's skills, needs and interests.</p> <ol style="list-style-type: none"> <li>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).</li> <li>2. Recognizing a bargain / comparison-shopping.</li> <li>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.</li> <li>4. Use of public transportation.</li> <li>5. How to find a vocational training program (including finding financial assistance).</li> <li>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.)</li> <li>7. Obtaining medical care, choosing a doctor or dentist.</li> <li>8. Basic information about caring for a pet (nutrition, proper discipline, veterinary</li> </ol>				

Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	
<p>services).</p> <p>9. Entertaining guests.</p> <p>10. Developing hobbies and leisure interests.</p> <p>11. Conflict resolution training.</p> <p>12. Use of community resources - emergency and non-emergency (food pantries, shelters, medical, financial).</p> <p>Providers of Life Skills Training are encouraged to develop a certificate or awards component as an incentive to clients who successfully complete the training</p> <p>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.</p>			
<p><i>Credentials:</i> 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.</p>			
<p>5524 H2021 Mentoring Community-based wrap services</p>	22.00		Hour
<p>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 provided by the Care Coordinator/Safety Service Manager. The time commitment would vary dependent upon the child's needs and program requirements.</p>			
<p><i>Credentials:</i> 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 Integrated 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.</p>			

Service	Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5575 T2003	Mileage Adjustment Non-emergency transportation	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.	1.00 per mi		Dollar
<i>Credentials:</i>					
5522 S5110	Parent Assistance Home care training	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. Includes 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.	30.00		Hour
<i>Credentials:</i> 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.					

Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	
5550A Parent Correctional Facility Visit.		250	Trip
<p>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.</p>			
<p>Correctional facilities/institutions visited differ by Provider Agency.</p>			
<p>Integrity Family Services provides services to:</p>			
<ul style="list-style-type: none"> <li>·Waupun Correctional Institution</li> <li>·Dodge (Waupun) Correctional Institution</li> <li>·John Burke (Waupun) Correctional Institution</li> <li>·Fox Lake (Waupun) Correctional Institution</li> <li>·Green Bay Correctional Institute</li> <li>·Taycheedah Correctional Institution</li> <li>·Robert E. Ellsworth Correctional Institution</li> <li>·Racine Correctional Institution</li> </ul>			
<p>St. Rose Youth and Family Center provides services to:</p>			
<ul style="list-style-type: none"> <li>·John Burke (Waupun) Correctional Institution</li> <li>·Taycheedah Correctional Institution</li> <li>·Robert E. Ellsworth Correctional Institution</li> <li>·Racine Correctional Institution</li> <li>·Southern Oaks Girls School</li> </ul>			
<p>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.</p>			

Service Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
<i>Credentials:</i>	<p>Staff with prior experience working with Wraparound youth desired.</p> <p>Prior experience as a Crisis Stabilization provider for Wraparound Milwaukee or equivalent training.</p> <p>Valid Wisconsin Drivers License (Drivers Abstract on file with agency)</p> <p>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.</p> <p>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.</p> <ul style="list-style-type: none"> <li>·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:</li> <li>·Crisis regulations.</li> <li>·Wraparound crisis intervention policies and procedures and</li> <li>·Specific requirements associated with this service.</li> <li>·Wisconsin state statues and administrative rules related to patient rights and confidentiality of youth records.</li> <li>·Basic mental health intervention techniques applicable to crisis situations.</li> <li>·Techniques for assessing and responding to persons with emergency mental health needs who are experience a crisis or AODA related problems.</li> </ul>			
5550B	<p>Parent Correctional Facility Visit.-Esco</p> <p>Sole Provider: Integrity Family Services</p> <p>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.</p> <p>This code may only be authorized in conjunction with PARENT CORRECTIONAL FACILITY VISITATION - Service Code 5550A.</p>	50		Trip
<i>Credentials:</i>				

Service	Name / ID		Set IPN	Avg IPN	Billing Unit
			Rate	Rate	
5550C	Parent Correctional Facility Visit.-Orie	Sole Provider: St. Rose Youth and Family Center	70		Session
		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.			
<i>Credentials:</i>					
5313	Placement Stabilization Center Respite care services, not in the home	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, day-to-day structured programming, providing necessary transportation to medical appointments, evaluations and to school and to facilitate visitation between the adolescent and family.	162.00		Daily
H0045					
<i>Credentials:</i> All such placements must be approved and coordinated through the liaison for Lutheran Social Services, First Choice for Children (phone number 325-3175).					
6002	Prior Year Payments	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 2005 payment needs to be posted after 3/31/06). 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.			Daily
Dollar					
<i>Credentials:</i>					
5355	Psych Hosp-ER Visit Emerg dept. visit	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.	255.00		Session
99285					

Service Name / ID			Set IPN Rate	Avg IPN Rate	Billing Unit
<i>Credentials:</i>					
5350 99223	Psychiatric Hospital Subsequent hospital care	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.	800.00		Daily
<i>Credentials:</i>					
5050 90862	Psychiatric Review/Meds Other Psychiatric Procedures - Pharmacologic mgmt  Pharmacologic mgmt	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).	80.00		Session
<i>Credentials:</i> M.D. License in the application process.  Effective 1/1/2007, providers of this services must have a National Provider Identifier (NPI)					
5051 90805,9 0807,90 811,908 13	Psychiatric Review/Meds-with Therapy Medical Evaluation and Medication Management	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).	150.00		Session
<i>Credentials:</i> M.D. License.  Providers of this services must have a National Provider Identifier (NPI)					
5180B 90899	Psychological Eval. Extended-Ph.D. Other psychiatric service or procedure	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 IPN. A psychological report on the specific findings must be submitted to the care coordinator within 30 days of the appointment.	1.00		Dollar



Service Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
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*Credentials:* Wisconsin Psychologist License.

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

5180A 90801	Psychological Evaluation Services-Ph.I Psychiatric diagnostic interview exam	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.	350.00	Evaluation
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*Credentials:* Wisconsin Psychologist License.

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

5526 H2022	Recreation Programming-Full Day Community-based wraparound service	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 identified at the time of application.	60.00	Daily
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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.

Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	
<i>Credentials:</i>	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.		
5527 H2022	Recreation Programming-Half Day Community-based wraparound service	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. 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.	35.00 Daily

Service	Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
<i>Credentials:</i>	<p>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.</p> <p>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.</p> <p>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.</p> <p>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.).</p> <p>A program description is to be included in the application process.</p>			
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.)	261.83	Daily
<i>Credentials:</i>	Residential Care License			
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.)	288.31	Daily
<i>Credentials:</i>	Residential Care License			

<b>Service Name / ID</b>		<b>Set IPN Rate</b>	<b>Avg IPN Rate</b>	<b>Billing Unit</b>
5346 T2048	Residential Care-Type II Behavioral health, long term residential		180.00	Daily
<i>Credentials:</i> Residential Care License.				
5339 T2033	Residential Rate Adjustment Residential care, NOS			Dollar
<i>Credentials:</i>				
5339A T2033	Residential Rate Adjustment, Prior Yea Residential care, NOS			Dollar
<i>Credentials:</i>				
5344 T2033	Residential Short-Term Stabilization Residential care, NOS		175.00	Daily
<i>Credentials:</i> Residential Care License				
5413 S5151	Respite, Daily Unskilled respite care, non-hospice		50.00	Daily

Service			Set IPN	Avg IPN	Billing Unit
Name / ID			Rate	Rate	
5413 S5151	Respite, Daily Unskilled respite care, non-hospice	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.		50.00	Daily
<i>Credentials:</i> Child Placing Agency Licence and Foster Care License for the direct service provider.					
5411 H0045	Respite, Foster care Respite care, not in the home	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 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.		50.00	Daily
<i>Credentials:</i> Foster Care License or Child Placing Agency License					
5410 S5150	Respite, Hourly Unskilled respite care, non-hospice	Temporary care, not to exceed eight hours per day, required to relieve the principal caregiver of the stress in taking care of child or for other reasons that help sustain the family structure or meet the needs of the child. Hourly respite should be a regularly scheduled need as determined by the Child and Family Team and reflected in the Plan of Care or Treatment Plan. Hourly respite for an emergency should also be documented in the crisis plan in the Plan of Care or Treatment Plan. Hourly respite may be provided in the child's home, respite provider's home, or in an agency setting by a qualified provider. The parent/legal guardian must provide signed consent for hourly respite.		10.00	Hour
<i>Credentials:</i> 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).					
5412 H0045	Respite, Residential Respite care services, not in the home	Overnight respite care in a licensed residential care 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.		105.00	Daily

Service Name / ID			Set IPN Rate	Avg IPN Rate	Billing Unit
5412 H0045	Respite, Residential Respite care services, not in the home	Overnight respite care in a licensed residential care 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.		105.00	Daily
<i>Credentials:</i>		Child Placing Agency License or Residential Care License			
5415 H0045	Respite-Crisis-FOCUS Respite Care Services	Overnight respite care in a licensed residential care 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.	205		Daily
<i>Credentials:</i>		Child Placing Agency License or Residential Care License			
5502A T2022	Safety Services Mgmt-Daily Rate Case management	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 safety service 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.	20.00	20.00	Daily
<i>Credentials:</i>		Safety Service 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.			

Service	Name / ID		Set IPN	Avg IPN	Billing Unit
			Rate	Rate	
5270	School Accountability Program	<p>The sole provider of School Accountability is Integrity Family Service. This service 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.</p> <p>Integrity staff will</p> <ul style="list-style-type: none"> <li>- Pick the youth up from their current residence (the care coordinator is responsible for notifying Integrity staff of the youth's current residence).</li> <li>- Provide transportation and supervision for each youth during transport to Norris School (W247 S10395 Center Drive, Mukwonago, WI)</li> <li>- Return the youth each day to their current residence.</li> </ul> <p>Note: Transportation pick-up and drop-off address must be the same address each day.</p> <p>Agency to maintain daily log indicating to and from trips and client compliance.</p>	55.00	55.00	Daily
<p><i>Credentials:</i> 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.</p>					
5305 H0045	Shelter Care (Boys) Respite care svcs, not in the home	<p>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.</p>	92.00		Daily
<p><i>Credentials:</i> Shelter License</p>					

Service Name / ID			Set IPN Rate	Avg IPN Rate	Billing Unit
5306 H0045	Shelter Care (Girls) Respite care svcs, not in the home	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.	84.00		Daily
<i>Credentials:</i>		Shelter License			
5304 H0045	Shelter Care (Younger Children) Respite care svcs, not in the home	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.	84.00		Daily
<i>Credentials:</i>		Shelter License			
5130 H2017	Special Therapy Psychosocial rehab svcs	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.	16.00		Quarter Hour
<i>Credentials:</i>		<p>1) A Bachelor-degreed 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.</p> <p>2) Masters-level licensed psychotherapist in one of above special therapies; or</p> <p>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.</p> <p>4) Certified member of the North American Riding for the Handicapped Association (NARHA) in connection with Equine Facilitated Experiential Learning.</p> <p>5) Licensed Occupational Therapy Assistant under supervision of a licensed Occupational Therapist</p> <p>Documentation of experience and copies of certifications/registrations/accreditations/licenses must be provided, as applicable, in the application process in accordance with the foregoing.</p> <p>Providers of this services licensed by the State of Wisconsin and must have a National Provider Identifier (NPI).</p>			
5131 H2017	Special Therapy-Group Psychosocial rehab svcs	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.	8.00		Quarter Hour



Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	
<i>Credentials:</i>			
<p>1) A Bachelor-degreed 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.</p> <p>2) Masters-level licensed psychotherapist in one of above special therapies; or</p> <p>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.</p> <p>4) Certified member of the North American Riding for the handicapped Association (NARHA) in connection with Equine Facilitated Experiential Learning.</p> <p>5)Licensed Occupational Therapy Assistant under supervision of a licensed Occupational Therapist</p> <p>Documentation of experience and copies of certifications/registrations/accreditations/licenses must be provided, as applicable, in the application process in accordance with the foregoing.</p> <p>Providers of this services licensed by the State of Wisconsin must have a National Provider Identifier (NPI).</p>			
5568 H2014	Specialized Academic Support Service Community-based wrap services	55.00	Hour
	<p>This is an agency based, one-to-one service and must be identified in youth's plan of care in relation to an educational need. Youth with an Individualized Education Plan receive individualized academic support services that support the need for this service by identifying limitations and special academic needs via 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. As part of this service, initial individual testing is conducted to help identify the youth's academic strengths and needs. An individualized support plan is developed and reviewed with the youth and family/care coordinator to identify the proposed objectives for the service recipient. Services focus on skill building within the basic areas of reading, writing, math, and study skills. Computer access allows for work on speed and accuracy. Re-testing of youth is conducted following approximately 50 hours of service in order to document gains made since the last test results. Reports regarding the service recipient's accomplishments and continuing challenges may be provided through monthly face-to-face meetings with the parent/caregiver or if this is not possible, in the form of a brief written quarterly reports that are made available to the parent/caregiver and/or care coordinator. Outcome goals should be related to the youth's academic needs and/or the youth's ability to manage academic requirements associated with a classroom setting such as taking tests, completing homework, etc.</p>		

Service	Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
<i>Credentials:</i>	Agencies providing this service must employ teachers certified by the Department of Public Instruction of the State of Wisconsin. 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 be DPI Certified. 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.			
5541 H0039	Supervision/Observ. Service Assertive community treatment prog	25.00		Daily
	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.			
<i>Credentials:</i>	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.			
	NOTE: Do NOT need to submit copy of H.S. Diploma or G.E.D. Certificate to Wraparound (Maintain in agency file only.)			

Service	Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5564A H0043	Supported Indep Living-Phase I Supported Housing	<p>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.</p> <p>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.</p> <p>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 and other commodities, obtaining permanent housing, home management, and transportation.</p> <p>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.</p>	Vaires		Daily
<i>Credentials:</i>		<p>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.</p> <p>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.</p> <p>Staff are expected to have prior training and experience in providing independent living skills to this target population.</p> <p>A description of the program and credentials of the coordinator must be provided in the application process.</p>			

Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	
5564C Supported Indep Living-Youth and Par	varies	122.00	Daily
<p>Supported Independent 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.</p>			
<p>Provider agency staff assists with locating and securing affordable, well-maintained, community-based housing to include:</p>			
<ul style="list-style-type: none"> <li>-Negotiation and mediation with landlords related to rental agreements.</li> <li>-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.</li> <li>-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.</li> </ul>			
<p>Financial assistance with the following while receiving this service:</p> <ul style="list-style-type: none"> <li>- Rent payment - \$650/month for a two bedroom apartment</li> <li>- Utility payments - \$200/month on budget plan</li> <li>- Telephone - \$50/month</li> <li>- 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 food/miscellaneous is flexible though food is the priority.</li> </ul>			
<p>This service also includes:</p> <ul style="list-style-type: none"> <li>-Approximately 10 hours per week of individualized life skills/home management training.</li> <li>-Curfew checks AM, PM, and weekend (combination of phone and face-to-face).</li> <li>-Assistance with locating job opportunities (if not provided through another service provider).</li> </ul>			
<p><b>ROLE OF THE WRAPAROUND CARE COORDINATOR:</b>  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</p>			

Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	
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.			
<i>Credentials:</i> 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.			

Service		Set IPN	Avg IPN	Billing Unit
Name / ID		Rate	Rate	
5564B H0043	Supported Indep Living-Youth w/Depe Supported Housing	116.00		Daily
<p>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:</p> <ul style="list-style-type: none"> <li>-Negotiation and mediation with landlords related to rental agreements.</li> <li>-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.</li> <li>-Some set-up accommodations including providing a bed and dresser for the Wraparound enrolled youth \$200 start up stipend.</li> <li>-Financial assistance with the following while receiving this service: <ul style="list-style-type: none"> <li>-Utility payments up to \$200/month on budget plan</li> <li>-Food to \$200/month.</li> <li>-Telephone to \$50/month.</li> <li>-Diapers/baby supplies to \$100/month.</li> <li>-Clothes/misc. to \$75/month.</li> <li>-Transportation to \$64/month (bus passes).</li> </ul> </li> </ul> <p>This services also includes:</p> <ul style="list-style-type: none"> <li>-Approximately 8 hours per week of individualized life skills training.</li> <li>-Daily house checks (combination of phone and face-to-face).</li> <li>-School checks (daily if needed).</li> <li>-Up to 8 hours per month life skills group.</li> <li>-Monitoring and assistance with doctor appointment for youth and minor child/children.</li> </ul> <p>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.</p> <p>ROLE OF THE WRAPAROUND CARE COORDINATOR: Liaison to the Supportive Independent Living Program Coordinator. Develop an</p>				

Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	
<p>individualized Plan of Care addressing the independent living needs of the adolescent</p> <p>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.</p> <p>Monitor progress and transitional planning for adolescent prior to being disenrolled.</p> <p>Obtain Court and parent or legal guardian approval as required for the youth and dependent(s) placement.</p> <p>Coordinate with Bureau Worker regarding the youth's child/children including access to services such as day care, payment for formula, and diapers.</p> <p>Assist with accessing natural support services in the community</p> <p>Wraparound Milwaukee Administration to approve initial placement and 1st month SAR entry with Care Coordinator to authorize monthly service via Turnaround SAR thereafter.</p> <p>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.</p>			
<i>Credentials:</i>	<p>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.</p> <p>Staff are expected to have prior training and experience in providing independent living skills to this target population.</p> <p>A description of the program and credentials of the coordinator must be provided in the application process.</p>		

Service Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5564 H0043 Supported Independent Living Supported housing	<p>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:</p> <ul style="list-style-type: none"> <li>- 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.</li> <li>- 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.</li> <li>- 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).</li> </ul> <p><b>CRITERIA FOR PROGRAM</b></p> <ul style="list-style-type: none"> <li>- Age 17</li> <li>- 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.</li> <li>- Approved by the Court and parent or legal guardian with ongoing involvement with parent/legal guardian whenever possible.</li> <li>- 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.</li> </ul> <p><b>ROLE OF OTHE WRAPAROUND CARE COORDINATOR:</b></p> <p>Liaison to the Supportive Independent Living Program Coordinator. Develop an individualized Plan of Care addressing the independent living needs of the adolescent</p>	Varies	79.00	Daily



Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	
<p>Coordinate and monitor the other needed services as delineated in the Plan of Care i. e. educational and treatment services.</p>			
<p>Monitor progress and transitional planning for adolescent prior to being disenrolled.</p>			
<p>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.</p>			
<p>Assist with accessing natural support services in the community.</p>			
<p>QUALIFICATIONS AND ROLE OF THE SUPPORTED INDEPENDENT LIVING PROGRAM</p>			
<p>COORDINATOR:</p>			
<p>Supervise staff providing day to day assistance.</p>			
<p>Vocational and job coaching provided as identified in the Plan of Care.</p>			
<p>Communication and collaboration with Wraparound Care Coordinator, i.e. attend Plan of Care and Family Team Meetings.</p>			
<p>Monitor and document progress in independent living.</p>			
<p>Evaluate further independent living needs prior to disenrollment from Wraparound.</p>			
<p><i>Credentials:</i> 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.</p>			
<p>Staff are expected to have prior training and experience in providing independent living skills to this target population.</p>			
<p>A description of the program and credentials of the coordinator must be provided in the application process.</p>			

Service	Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5560 H2023	Supported Wk Envir/Job Coach Supported employment	<p>This service provides a supported work environment and training environment for Wraparound and SafeNow clients and/or siblings of clients ages 14-18, or a parent/legal guardian who is in need of intervention and support on the job. This service is individualized and time limited (not to exceed 6 months) unless otherwise authorized by Wraparound/SafeNow. This service may include vocational and functional assessments, job training, career planning and job exploration and placement. This service must be identified as a need in the Plan of Care for Wraparound and in the Treatment Plan for SafeNow Safety Services.</p> <p>Regarding documentation of this service:  A weekly summary note is permissible. The agency can establish their own note format, but the note must include the following items:</p> <ol style="list-style-type: none"> <li>1. Agency letterhead including that the service being provided is Supported Work Environment - 5560</li> <li>2. If the client is Wraparound or Safenow</li> <li>3. Month/year service is being provided</li> <li>4. The clients name (if the client is a sibling /caregiver of the identified enrollee then the identified enrollees name must also be referenced)</li> <li>5. All dates (i.e. – 10/29/03) of when the client was seen face to face or when any work was done on behalf of the client, i.e. – job searches, phone calls/contacts with collateral’s/potential employers, etc.</li> <li>6. The total number of service hours provided for that week. (Although a total amount of service time is being noted, the actual time spent providing the services to the client or on behalf of the client for all the dates of service listed, must be referenced either within the context of the note or can be kept separately on some time of monthly client log. If the agency desires to use a separate logging system to record the specific daily amount of service time spent with the client or on behalf of the client, the total hrs. for the month on that log must correlate with the “Total time seen for the week” area on the note. The log must then be attached in some way to the note. This is necessary for auditing purposes).</li> <li>7. The body of the note must reference the specific tasks/calls/contacts engaged in/made related to the identified client’s vocational needs and goals. (These needs/goals should correlate with what is on the Plan of Care for Wraparound or on the Treatment Plan for SafeNow).</li> <li>8. The providers signature -i.e. – full name (or at minimum first initial and full last name) and credentials (if applicable).</li> </ol>	40.00		Hour

Service Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
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9. Notes must be kept in chronological order with the most recent week's note on top.

NOTE: If more than one provider at the agency is involved in working with the same client during the month, both providers are responsible for documenting their own interactions with/for the client as referenced above. The total time billed for that client for that month should equal the total service time of both of those providers.

All clients must have their own chart that must be stored in a fireproof cabinet/room.

A sample of a Note format to utilize is available by calling the Integrated Provider Network.

*Credentials:* In the application process an agency curriculum is required as to how the service will be delivered.

5307 S5145	Supportive Foster Care-Level 1 Foster care, therapeutic	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.	53.42		Daily
<i>Credentials:</i> Child Placing Agency License					

5203 H0022	Suspension Accountability Program Community Based Wraparound Service	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.	50.00		Daily
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Service	Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5203 H2022	Suspension Accountability Program Community Based Wraparound Service	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.	50.00		Daily
<i>Credentials:</i>	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.				
5576A	Taxi - American United Taxicab No Sh	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.	5.00	5.00	Trip
<i>Credentials:</i>	Per established City of Milwaukee ordinance/requirements at the time that service is provided.				

Service	Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
5576 T2003	Taxi - American United Taxicab Service Non-emergency transportation	Varies		Dollar
<p>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.</p> <p>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.</p> <p>One time, “emergent” rides should be documented as such in a progress note.</p> <p>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:</p> <ul style="list-style-type: none"> <li>\$2.25 base rate</li> <li>\$2.00 per mile and \$2.50 per 10 minutes in the cab</li> <li>\$0.75 extra passenger</li> <li>\$5.00 per ride – NO SHOW – no maximum</li> </ul> <p><b>REQUEST FOR TAXICAB TO WAIT</b></p> <p>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.</p> <p>Only Wraparound Milwaukee Care Coordinators, FISS Case Managers and authorized Wraparound Finance staff may authorize a trip (ride) with American United Taxicab Service.</p>				

Service Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
5576 Taxi - American United Taxicab Service	Varies		Dollar
<p>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.</p> <p>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.</p> <p>One time, “emergent” rides should be documented as such in a progress note.</p> <p>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:</p> <ul style="list-style-type: none"> <li>\$2.25 base rate</li> <li>\$2.00 per mile and \$2.50 per 10 minutes in the cab</li> <li>\$0.75 extra passenger</li> <li>\$5.00 per ride – NO SHOW – no maximum</li> </ul> <p><b>REQUEST FOR TAXICAB TO WAIT</b></p> <p>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.</p> <p>Only Wraparound Milwaukee Care Coordinators, FISS Case Managers and authorized Wraparound Finance staff may authorize a trip (ride) with American United Taxicab Service.</p>			

Service	Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
<i>Credentials:</i>	Per established City of Milwaukee ordinance/requirements at the time that service is provided.			
5577	Transportation Non-emergency transportation	15.00		Trip
	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.			
<i>Credentials:</i>	Valid State of Wisconsin Driver’s License Criteria:			
	<ol style="list-style-type: none"> <li>1. All transport drivers must have a valid Wisconsin driver’s license.</li> <li>2. A valid Commercial Driver’s License (Class C Minimum) is required for drivers of vehicles used to transport 15 or more passengers.</li> <li>3. An endorsement “S” on the driver’s license is required for school bus drivers.</li> <li>4. A Wisconsin Department of Transportation public driver record abstract that demonstrates a driving record free of serious traffic violations.</li> <li>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.</li> <li>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.</li> </ol>			

Service	Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5578	Transportation Mileage Non-emergency transportation	<p>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.</p> <p>Transportation Mileage is reimbursed in tenths of a mile at the rate in effect at the time the service was provided.</p>	1.75		Miles
<i>Credentials:</i> Agency is authorized to provide Service Code 5577- Transportation and meets all requirements associated with Service Code 5577 – Transportation.					
5579	Transportation-Additional Passenger Non-emergency transportation	<p>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.</p>	10.00		Each
<i>Credentials:</i> Agency is authorized to provide Service Code 5577- Transportation and meets all requirements associated with Service Code 5577 – Transportation.					
5570 T2003	Transportation-Non Network Provider Non-emergency transportation	<p>For Wraparound &amp; 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.</p>	1.00		Total



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Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	

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*Credentials:*

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Service	Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5311 S5145	Treat. Foster Care (Agency) Foster care, therapeutic	<p>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):</p> <p>“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 changed 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.”</p> <p>Among the responsibilities of the foster parent under HFS 38.06 that are of particular importance to Wraparound Milwaukee are:</p> <ol style="list-style-type: none"> <li>1) Assuming primary responsibility for implementing in-home care and treatment strategies specified in the treatment plan.</li> <li>2) Assisting and supporting a foster child in having appropriate and positive contact with his/her family.</li> <li>3) Providing or arranging transportation for the child as deemed necessary by the child and family treatment team.</li> <li>4) Cooperatively and consistently carrying out the Treatment Plan.</li> <li>5) Participating in the evaluation of his/her performance on a regularly scheduled basis.</li> </ol> <p>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:</p> <ul style="list-style-type: none"> <li>-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.</li> <li>- Providing or arranging for additional child care personnel during critical periods, such as after school or evenings.</li> <li>- Advocating for the child with the staff of the child’s school (emphasis on public school programs).</li> </ul>		103.70	Daily

Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	

- 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.

Service			Set IPN	Avg IPN	Billing Unit
Name / ID			Rate	Rate	
5311A S5145	Treat. Foster Care (Agency) Youth w/E Foster care, therapeutic	<p data-bbox="596 178 1612 240">This service is for Wraparound Youth with a dependent child or children that are placed with the youth in the treatment foster home.</p> <p data-bbox="596 282 1612 344">Among the responsibilities of the foster parent under HFS 38.06 that are of particular importance to Wraparound Milwaukee are:</p> <ol data-bbox="596 350 1612 646" style="list-style-type: none"> <li data-bbox="596 350 1612 412">1) Assuming primary responsibility for implementing in-home care and treatment strategies specified in the treatment plan.</li> <li data-bbox="596 418 1612 480">2) Assisting and supporting a foster child/youth in having appropriate and positive contact with his/her family.</li> <li data-bbox="596 487 1612 548">3) Providing or arranging transportation for the youth and dependent child/children as deemed necessary by the Child and Family Treatment Team.</li> <li data-bbox="596 555 1612 584">4) Cooperatively and consistently carrying out the Treatment Plan.</li> <li data-bbox="596 591 1612 646">5) Participating in the evaluation of his/her performance on a regularly scheduled basis.</li> </ol> <p data-bbox="596 688 1612 750">Responsibilities of the Provider/Treatment Foster Care Agency and agency social service case manager in HFS 38.07 and HFS 38.10 includes:</p> <ul data-bbox="596 756 1612 1224" style="list-style-type: none"> <li data-bbox="596 756 1612 786">-Arranging for a minimum of 8 to 24 hours of respite care to the foster parent.</li> <li data-bbox="596 792 1612 854">- Providing or arranging for additional childcare personnel during critical periods, such as after school or evenings.</li> <li data-bbox="596 860 1612 922">- Advocating for the youth and dependent children with the staff of the youth/children's school(s) (emphasis on public school programs).</li> <li data-bbox="596 928 1612 1023">- 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.</li> <li data-bbox="596 1029 1612 1159">- 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.</li> <li data-bbox="596 1166 1612 1224">- Personally seeing and interacting with the youth at least twice per month in a variety of settings, i.e. home, school, community.</li> </ul> <p data-bbox="596 1266 1612 1422">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.</p>		128.98	Daily

Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	

*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.

5312 S5145	Treat. Foster Care Specialized Foster care, therapeutic	Specialized foster care agency, i.e. teen and baby or child with multiple needs to include highly specialized services. Services may include the following:	138.50	Daily
		<ul style="list-style-type: none"> <li>*Independent Living Skills Programming</li> <li>*24-hour Crisis Intervention</li> <li>*Baby Care/Parenting and Nurturing Programming</li> <li>*Medical/Physical/Cognitive needs</li> </ul>		

Service Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
<i>Credentials:</i>	<p>Homes must be licensed as Treatment Foster Homes by the agency. Agencies must submit a Child Placing Agency License in the application process.</p> <p>The treatment foster parents and/or the supervising Master’s level provider must be available to the youth at all times.</p> <p>The treatment foster parents shall document daily contact notes relevant to their provision of mental health crisis services.</p> <p>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.</p> <p>All other requirements relevant to hiring under caregiver law in Wisconsin apply. Supervision and training shall be provided as follows:</p> <ol style="list-style-type: none"> <li>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.</li> <li>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.</li> <li>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.</li> </ol>			

Service	Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5504 T2022	Treat. Foster Care-Care Coordination Case Management	<p>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.</p> <p>Duties and Responsibilities:</p> <ol style="list-style-type: none"> <li>1. Establish a caring, supportive, nurturing relationship with one adolescent young woman</li> <li>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.</li> <li>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.</li> <li>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.</li> <li>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.</li> <li>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.</li> <li>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.</li> <li>8. Facilitate team meetings to develop and update Plan of Care at least every 30 days.</li> <li>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.</li> <li>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.</li> <li>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.</li> <li>12. Provide respite and support to other young women placed in similar homes,</li> </ol>		198	Daily

Service	Set IPN	Avg IPN	Billing Unit
Name / ID	Rate	Rate	
<p>participate in support groups as desired with other professionals in the program</p> <p>13. Seeks out assistance and support from other team members, foster care agency and Wraparound Milwaukee as needed.</p> <p><i>Credentials:</i> 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.</p> <p>OR</p> <p>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.</p> <ol style="list-style-type: none"> <li>1. Able to be licensed by a treatment foster care agency under HFS 38 and 56.</li> <li>2. Will keep all licenses, certifications and insurance policies current and on file with the foster care agency.</li> <li>3. Will be evaluated on a bi-annual basis within the first year of licensing unless circumstances suggest the need for a special evaluation.</li> <li>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.</li> </ol>			



Service			Set IPN	Avg IPN	Billing Unit
Name / ID			Rate	Rate	
5504A T2022	Treat. Foster Care-Care Coordination- Case Management	<p>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.</p> <p>Duties and Responsibilities:</p> <ol style="list-style-type: none"> <li>1. Establish a caring, supportive, nurturing relationship with each of the adolescent young woman</li> <li>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.</li> <li>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.</li> <li>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.</li> <li>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.</li> <li>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.</li> <li>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.</li> <li>8. Facilitate team meetings to develop and update Plan of Care at least every 30 days.</li> <li>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.</li> <li>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.</li> <li>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.</li> <li>12. Provide respite and support to other young women placed in similar homes,</li> </ol>	102		Daily

Service Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
<p>participate in support groups as desired with other professionals in the program</p> <p>13. Seeks out assistance and support from other team members, foster care agency and Wraparound Milwaukee as needed.</p> <p><i>Credentials:</i> 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.</p>			
OR			
<p>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.</p> <ol style="list-style-type: none"> <li>1. Able to be licensed by a treatment foster care agency under HFS 38 and 56.</li> <li>2. Will keep all licenses, certifications and insurance policies current and on file with the foster care agency.</li> <li>3. Will be evaluated on a bi-annual basis within the first year of licensing unless circumstances suggest the need for a special evaluation.</li> <li>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.</li> </ol>			
<p>5222A 99361 Treatment Plan Meeting Attendance Team Conferences</p>	96.00		Session
<p>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:</p> <ol style="list-style-type: none"> <li>1. AODA Assessment (5001)</li> <li>2. Individual/Family Therapy-Office Based (5100)</li> <li>3. Individual Therapy-Ph.D.-Office Based (5111A)</li> <li>4. Substance Abuse Counseling &amp; Therapy (5101)</li> <li>5. Group Counseling &amp; Therapy (5120)</li> <li>6. AODA Group Counseling &amp; Therapy (5121)</li> <li>7. Special Therapy (5130)</li> <li>8. Special Therapy-Group (5131)</li> </ol> <p>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.</p>			
<p><i>Credentials:</i> See Credential required for providers under the respective services eligible for reimbursement, i.e. 5001, 5100, 5111A, 5101, 5120, 5121, 5130 and 5131</p>			

Service Name / ID		Set IPN Rate	Avg IPN Rate	Billing Unit
5521 H2021	Tutor Community-based wrap svcs	22.00		Hour
<p>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.</p>				
<p>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: <a href="https://wi-recordcheck.org">https://wi-recordcheck.org</a>), and valid Drivers'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.</p>				
<p>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.</p>				
<p>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.)</p>				
<i>Credentials:</i>	<p>Requirements: 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.</p>			
<p>Agencies must submit their training curriculum outlining the 15 hours of training for approval by the Integrated Provider Network when applying for this service. A minimum of 15 hour training is required of all staff prior to service provision. A copy of their certificate from the agency verifying this training must be submitted to the Integrated Provider Network and a copy maintained in the agency employee file.</p>				

Service	Name / ID	Set IPN Rate	Avg IPN Rate	Billing Unit
5704	Youth Relationship Building-A.S.A.P.	25		Session
<p>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.</p>				
<p>A.S.A.P. Healthy Relationships sessions will include the following topics:</p> <ul style="list-style-type: none"> <li>- Sexually Transmitted Disease</li> <li>- Adolescent Development and Relationships</li> <li>- Developing Friendships First</li> <li>- Dating as an Adolescent</li> <li>- Learning About Unhealthy Relationships</li> <li>- How to Build a Healthy Relationship</li> <li>- Media, Pornography and Manipulation</li> <li>- Empowerment and Making Personal Positive Choices</li> </ul>				
<i>Credentials:</i>	<p>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.</p>			