

June 8, 2022

<Provider Name>
<Provider Address 1>
<City> <State> zipcode5-zipcode4

Dear Provider:

The purpose of this letter is to clarify the policy of evaluation and outcomes measurement for Wraparound services. It also provides clarification as to the provision of supervision for Wraparound services.

The Michigan Department of Health and Human Services (MDHHS) holds Prepaid Inpatient Health Plans (PIHPs) and enrolled providers responsible for oversight, completion of all evaluation and outcomes measurements, and the provision of supervision to ensure fidelity.

The MDHHS Medicaid Provider Manual (Behavioral Health and Intellectual and Developmental Disability Supports and Services chapter; Covered Services section; Wraparound Services for Children and Adolescents – Evaluation and Outcomes Measurement subsection) outlines the requirement of evaluation and outcomes measurement:

- Completion of the Family Status Report form at intake and every three months until the family graduates from Wraparound. Upon graduation, the facilitator will complete the post-graduation/follow-up Family Status Report.
- Additional evaluation tools will be completed as identified and requested by MDHHS.
- Ensure completion of the Child and Adolescent Functional Assessment Scale (CAFAS), the Preschool and Early Childhood Functional Assessment Scale (PECFAS), or the Devereux Early Childhood Assessment (DECA) at intake, quarterly, and at graduation.
- Adherence to Wraparound model fidelity may be reviewed at enrollment, re-enrollment, and at technical assistance visits through file review, family interviews, and evaluation and fidelity tools.

Michigan State University (MSU) analyzes Wraparound data through the Wraparound Evaluation Project (WEP, referred to as “REDCap”) and provides an annual report to the State of Michigan. The reported data is used to measure outcomes, assess fidelity to the Wraparound model, and inform future efforts to improve and strengthen Wraparound in the State of Michigan. MDHHS requires the timely and thorough completion of (1) the Family Status Report (initially, quarterly, upon graduation, and one additional follow-up time), (2) Team Membership form (quarterly and upon changes), and (3) Fidelity form (at 6 and 12 months).

Facilitators and supervisors from each enrolled provider site are able to review real-time data that can be used to examine outcomes and improve fidelity to the model. The use of REDCap data may also assist in identifying areas of need regarding facilitation with youth and families and overall improvement within the catchment area. The data can assist with identification of systemic barriers that, through collaboration with leadership and community teams, can result in strategizing effective solutions.

The Medicaid Provider Manual (Behavioral Health and Intellectual and Developmental Disability Supports and Services chapter; Covered Services section; Wraparound Services for Children and Adolescents – Qualified Staff subsection) outlines the supervision requirement:

- Complete the MDHHS three-day Wraparound new facilitator training within 90 days of hire and one additional MDHHS supervisory training in their first year of supervision. If the supervisor is working directly with children and families, they must complete the initial training prior to reporting Medicaid encounters.
- Attend two MDHHS Wraparound trainings annually, one of which shall be a Wraparound supervisor-specific training.
- Participate on the Community Team.
- Provide individualized supervision and coaching to the Wraparound staff weekly based on their individual needs and experience and maintain a supervision log. Supervision logs will be available at site reviews and re-enrollment.
- Ensure documentation of attendance at required trainings is maintained for all Wraparound staff and available for review upon request.

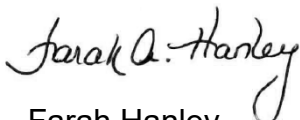
Individualized, weekly supervision and coaching is essential for adherence to the fidelity of the Wraparound model. Wraparound supervisors should be modeling and reinforcing Wraparound values. They should be identifying facilitators' areas of need and utilizing their strengths to develop strategies to advance facilitation skills. Supervision should also include conducting ongoing evaluation of each component for all Wraparound phases, periodic review of documentation, and quarterly (at minimum) review of progress toward outcomes.

Please contact Heather Valentiny, Statewide Wraparound Coordinator, at ValentinyH@michigan.gov if you have any questions.

Please contact the Biomedical Research Informatics Core (BRIC) Team at MSU at msuwraparound@gmail.com and/or 517-353-8580 if you need technical assistance with REDCap.

An electronic version of this document is available at www.michigan.gov/medicaidproviders >> Policy, Letters & Forms.

Sincerely,



Farah Hanley
Chief Deputy for Health