

## Wraparound Out-Of-County Prompting Questions for the County of Jurisdiction to ask the County of Placement

The purpose of this document is to support the county of jurisdiction or provider in gathering information when a child/youth and family are seeking Wraparound services outside of their county of jurisdiction. This form is intended to prompt discussion about Wraparound approval and authorization. **Case level coordination should occur prior to the transition to the county of placement** with the current Child and Family Team (CFT) in the county of jurisdiction and include any expected new members of the CFT in the county of placement.

This document is not intended to be mandatory policy, as contracting, fiscal, and accounting policies and processes vary greatly by county and provider.

Form Completed by:

Date:

Childs Name:

Childs CWS/CMS Case ID:

Child's Status (Dependent, Ward, AAP, Other):

Contact Person:

Contact Information:

:

<b>County Structure Questions</b>	
Which county agency is the lead for the Wraparound program?	
Does the county contract with a provider?	
Does the county/provider have a referral form or do I need to provide one?	
Does the provider's contract prevent them from contracting with another county?	
Is there capacity to serve this child/youth and family?	

Does a contract need to be executed to serve this child/youth and family? If yes, is the contract executed with the county or the provider?	
If yes, can services begin before the contract is executed?	
How long will it take to process a contract?	
How long does it take to initiate wraparound services?	
Does county/provider provide Specialty Mental Health Services?	
Does the Wraparound program bill Medi-Cal?	
<b>Program Questions</b>	
What is the make-up of Wraparound Team i.e. facilitator, family specialist, parent partner?	
Are there parent partners and/or youth partners on the Wraparound Team?	
What are the staffing ratios for the Wraparound Team?	
What are the services provided (such as 24-hour care, emergency on-call, etc.)?	
Does the county have time-limits for Wraparound services? If yes, please explain the time limits.	
Does the county require a specific release of information or authorization to be used?	
What are the expectations around sharing documents? – look at other doc for wording	
How does the county monitor quality assurance for services and performance?	
What is the authorization period for Specialty Mental Health Services including EPSDT?	

<b>Fiscal Questions</b>	
How is the Wraparound program funded? (fee for service, cost reimbursement, flat rate, etc.)?	
What is the Wraparound rate?	
Will the county/provider be willing to accept a reduced rate if that is what our county pays?	
What is the county/providers process for invoicing payments?	
Does your county/provider use Wraparound Trust Funds, and how do you determine what money and how much? If yes, what is your protocol about these funds including who has the authority to so? *Not applicable to Wraparound Aftercare	
Would your county/provider be willing to return any reinvestment funds to our county?	
What steps are necessary to ensure that the child receives Medi-Cal benefits including EPSDT?	
If the child/youth and family are utilizing AAP Wraparound, what is the process to begin services?	