

PRACTICES AND PROCEDURES

4542. Wraparound with Intensive Services (WISe)

Approval: Connie Lambert-Eckel, Acting Assistant Secretary

Original Date: October 19, 2017

Revised Date: Not applicable

Policy Review: October 1, 2021

Purpose

To identify and refer Medicaid eligible children and youth up to age 21 who have complex behavioral health needs in-home and out-of-home in an open case in Children's Administration (CA) for a Wraparound with Intensive Services (WISe) screen and support access to WISe, when the child or youth qualifies for services.

Scope

This policy applies to all DCFS staff.

Laws

[Social Security Act Title XIX Early and Periodic Screening, Diagnostic, and Treatment \(EPSDT\)](#)

Policy

Caseworkers must:

1. Referral for a WISe Screen
 - a. Refer or verify a referral is made to a [Designated Mental Health Provider](#) for a WISe screen for children and youth with complex behavioral health needs with an open case in any program who meet the following criteria:
 - i. Entering or discharging from a Children's Long-Term Inpatient (CLIP) facility;
 - ii. Have requested or been referred for crisis intervention services, including involuntary commitments;
 - iii. Are being considered or referred for [Behavior Rehabilitation Services \(BRS\)](#);
 - iv. Are receiving BRS. A WISe screen is required every six months, which can coincide with the quarterly report date; or
 - v. Are transitioning out of BRS. BRS contracted providers are responsible for initiating the screening referral for mental health services upon exiting BRS services.
 - vi. Are at-risk of out-of-home placement;
 - vii. Are experiencing multiple placement disruptions;
 - viii. Have disrupted from a pre-adoptive or adoptive placement;
 - ix. Are returning home and need additional behavioral health support and services;
 - x. Frequently runs away and has returned after being missing from care;
 - xi. Have special education needs or have a 504 plan with multiple school suspensions; or

- i. Conversations with the child or youth, families and caregivers regarding WISE services.
- ii. Date a WISE referral was made and screen results, when made by the caseworker.
- iii. Name of individual who agreed to make the referral, when applicable.
- iv. Verification of referral being made by another individual when not made by the caseworker.

Resources

[Wise Information Sheets for Children's Administration Caseworkers](#)

[Wise Referrals Contact List by County](#)

[Wraparound with Intensive Services \(Wise\) Implementation](#)

[Wise Manual](#)

[Regional Family, Youth, and System Partner Round Table Manual and Resource Guide](#)

[Wise Overview](#)

[Wise Dashboard](#)