



WRAPAROUND MILWAUKEE

Child & Adolescent Services Branch

News – A Monthly Publication

APRIL 2010

From the Director...



Mobile Urgent Treatment Team Awarded Agency of the Year by UWM

The Wraparound Milwaukee Mobile Urgent Treatment Team (MUTT) has been awarded “Agency of the Year” by the UWM Helen Bader School of Social Work. Dr. Chris Morano, Director of the MUTT team, has been invited to attend an awards ceremony on Friday, May 7, 2010, at the UWM Alumni House. The award will be presented to the MUTT team by the UWM Chancellor.

Bruce Kamradt, Director

team has never let the family forget how their hard work and dedication led to the improvements in their relationship.

(* Name changed for confidentiality.)

Submitted by Alternatives in Psychological Consultation

National News...

Healthcare Reform – What Does it Mean for People with Mental Health Illnesses

On March 23, 2010, President Obama signed the landmark healthcare reform bill into law. This is a very comprehensive piece of legislation that will take some time for us to understand all of its implications. The following are some of the reforms as it relates particularly to mental illnesses and other features under the law:

A. General Overview

1. To end discriminatory practices and make coverage more affordable, the law includes insurance market reforms that will help individuals with mental health illness acquire insurance at a fair price. It requires insurers to offer and renew insurance coverage for all who apply (guaranteed issue and renewal). It prohibits the denial of coverage on the basis of pre-existing conditions and allows dependent children to remain on their parent’s health policies until the age of 26.

Effective for plan years beginning six months after enactment, the law prohibits insurers from denying or failing to renew coverage on the basis of health status, medical conditions, including mental illness, disability and a number of other circumstances that currently allow insurers to discriminate against many people.

The provision that would allow dependent children to remain on their parent’s health policies until the age of 26 would also take effect six months after enactment of the law. Youth transitioning to adulthood often have a difficult time accessing and maintaining coverage and those with emotional and behavioral disturbances are at greater risk for being uninsured. Not all of these young persons

Wraparound Success Story...

Jacob, 17, was enrolled in Wraparound Milwaukee in June 2009 on a delinquency order. Jacob has lived with his father and his father’s girlfriend for most of his life. His mother has multiple mental health issues that created an unstable living environment for him. Jacob struggled with his identity for most of his life, contributing to drug and alcohol use at an early age. Jacob soon got into the habit of frequently using drugs and alcohol as a way to cope with the uncertainty in his life. When he was enrolled in Wraparound, Jacob began attending weekly alcohol/substance abuse therapy, as well as pushing himself to work hard in school. This helped Jacob to meet new friends whom were able to help him get clean and sober and discover who he is and set positive goals for his future. Jacob’s goal of graduating from high school was soon realized; after months of hard work, Jacob made the honor roll. He has never been more proud of himself than for that accomplishment.*

Due to family problems, Jacob and his father were never able to really get to know one another as Jacob grew up. Jacob and his father went through several rough patches during the first few months of Wraparound involvement, but with the aide of a crisis stabilizer and the dedication of the family in participating in family therapy, these issues have been resolved and Jacob and his father are closer than they have ever been. The family credits their family therapist for much of the improvement in their communication issues; however, the child and family

are Medicaid eligible, so the law would really help provide insurance coverage for these young persons.

2. **Requirement to Purchase Insurance** – starting in 2013, all American citizens and legal residents would be required to purchase coverage through the individual insurance market, through public programs like Medicare or Medicaid, or through their employer, unless they are eligible for an exemption or are at or below 100% of the federal poverty level. Individuals who fail to purchase insurance (non-employer coverage, for example) would have to pay a phased-in penalty tax ultimately resulting in a fee of \$750 per individual or up to \$2,250 for a family.

3. **Health Insurance Exchanges** – In order to facilitate easy comparison and purchase of health insurance plans, individual and small businesses, state-based governmental or non-profit exchanges would be established effective in 2014. These exchanges would be responsible for ensuring that health plans offer coverage that meets standards established by the government (Secretary of Health and Human Services) for network adequacy, accreditation, consumer information, outreach and enrollment, etc.

Individuals may enroll in any qualified health plan made available to them. Employers and individuals are under no obligation to purchase insurance through the exchange and can still purchase a health plan offered outside the exchange. However, the bill compels employers that offer coverage under the standards of the exchange to provide “free choice vouchers” to qualified employees for the purchase of qualified health plans through exchanges.

4. **Affordable Coverage** – There will most likely be four benefit categories offered to consumers through state exchanges. Each plan would have a different value and different out-of-pocket costs with an upper limit on out-of-pocket costs.

All exchange plans will be required to offer a minimum benefit package that must cover mental health and addiction services, and those benefits must meet the standards for parity in both federal and state law. There would be no cost sharing for preventive services.

5. **Tax Credits** – Beginning after December 21, 2013, tax credits for meeting the costs of

insurance premiums and reduced cost-sharing would be made available to lower income individuals to assist them in meeting the costs of purchasing health insurance through a state exchange. Individuals would be eligible for the tax credit if their income is up to 400% of the Federal poverty level.

B. Changes to Medicaid

Nothing impacts more on coverage for Wraparound Milwaukee families than Medicaid. And the new health insurance reform package has reforms in the Medicaid area.

1. **Eligibility** – Effective 2014, Medicaid eligibility is expanded to cover all individuals with incomes at or below 133% of poverty (\$30,000 a year for a family of four or \$14,400 for an individual). States also have the option to begin this coverage starting in 2011. Wisconsin already exceeds that with BadgerCare Plus. States are also given the option to cover individuals over 133% of poverty including childless adults, which includes many adults with mental illnesses.

As has been implemented in BadgerCare Plus, those newly eligible childless adults who have incomes at or below 133% of the poverty level, would be given limited benefits that can be designed by the State, but must conform to the requirements for Benchmark Medicaid plans set by the Deficit Reduction Act (DRA). The benchmark package must provide minimum essential coverage, but can limit such things as number of physician visits per year, extent of inpatient days covered or maximum number of outpatient therapy visits or medications covered. Wisconsin may need to look again at its benefit package to see if it does provide the essential core of services required under the DRA.

Children in foster care and children receiving assistance and parents on welfare are exempted from the more limited benchmark provisions and of potential importance to our new Youth in Transition Initiative, the law extends Medicaid coverage for former foster care children up to age 25 (previously ended at age 21).

The Federal government would pay 100% of the costs of covering newly eligible individuals under Medicaid until 2017, at which time the State would start to contribute to the cost.

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2. **Home and Community-Based Services** – Access to home and community-based services (HCBS) is improved for low-income individuals in need of long-term community care. There are incentives from states to offer HCBS as alternatives to institutional care for individuals with disabilities who require long-term care services and support. This supports utilization of programs like Wraparound Milwaukee that reduce institutionalization of children with serious emotional and mental health needs.

The State plan option to cover home and community-based services (Section 1915(i) of the law is amended to raise the income level for eligibility so it is the same as under home and community-based waivers (i.e., 300% of the SSI level in the State). The range of services that can be furnished under 1915(i) is also expanded so it is the same as the services allowed under the home and community-based waivers. The provision in current law that allowed states to set a limit on the number of individuals who could receive 1915i services has been repealed. Finally, states may target this state plan service to a specific population, such as people with mental illness.

The law also creates a new section of the Social Security Act called 1915(k), authorizing a State plan option to provide home and community-based attendant care services and supports to individuals with incomes at or below 150% of poverty, who without such services would require institutionalization. This has some possible impact on Wraparound Milwaukee, but it is still too early to see what will be covered under this new State MA option.

3. **Prescription Drug Coverage** – The new law includes amendments that are designed to make prescription drugs cheaper for Medicaid programs and expands coverage for drugs currently not covered.
4. **Health Care Homes** – The new healthcare case law establishes a new Medicaid State plan option that would allow beneficiaries with at least two chronic conditions or those with a serious and persistent mental health condition to designate a provider as their health home. These health homes would be required to meet certain standards and provide specific services, including comprehensive care management, care coordination, transition services from inpatient

to other settings, patient and family support and referrals to appropriate community services.

These are some of the reforms and changes in the New Healthcare Legislation that impact on mental health care. There are many other reforms that will result in significant changes in how Americans obtain and use healthcare in the future. We will continue to identify and describe those that may impact on programs like Wraparound Milwaukee.

Bruce Kamradt, Director



**Administrative
Professionals Day**
April 21st

Mobile Crisis...

Tragically, bullying has become a news topic again, as a 9th grader in Massachusetts suicided after months of bullying by classmates. This has been an issue everywhere, and locally schools have successfully implemented prevention programs. While this young girl suicided, many youth who are bullied also go on to direct their difficult feelings outward, committing acts of aggression as well. Successful programs rely on changing student and staff culture, and encouraging everyone to get involved. Bullying stops when it is not tolerated. Studies show that most youth will curb bullying if an adult intervenes. Today, cyber bullying is becoming an increasing problem and can have a devastating effect on youth, even when there is no direct face-to-face confrontation or physical contact. In the end, most youth who cyber bully also engage in other forms of bullying.

In April, the Mobile Urgent Treatment Team for Milwaukee Public Schools (MUTT-MPS) will dialogue with a group of elementary students at 35th Street School, about self-concept and self-esteem. The MUTT-MPS team will use a multi-model approach to engage students around these topics.

Dr. Chris Morano, Mobile Crisis Director

Quality Assurance...

Quality Care

The National Committee for Quality Assurance (NCQA) defines “quality care” as the extent to which a client gets the care they need in a manner that most effectively protects or restores their health. This means having timely access to care, getting treatment that has

been proven to be effective and getting appropriate preventative care. One's mental and behavioral health is one component of an individual's care when addressing that person's well being in a holistic fashion. There is convincing research that when one's mental health is compromised, that one's physical health suffers (i.e., the effect of stress on the body, how loneliness impairs the immune system, how happy people are more immune to common colds, etc.).

Through the care that our youth and families receive in Wraparound Milwaukee, the extent of our healing powers go beyond that of mental health. The wraparound philosophy with its consideration of all life domains provides a holistic approach to caring and servicing. Those providers, care coordinators and community partners that work so diligently in providing and implementing this form of care should be proud of the impact you have in improving the quality of life for the youth and families in Wraparound Milwaukee. Thank you!

If you have any questions or suggestions, please feel free to give me a call at (414) 257-7608 or email me at pam.erdman@milwcnty.com.

Pamela Erdman, QA/QI Director

Melissa Cronick - Willowglen

Nominated by Movnir Corban – Alternatives in Psychological Consultation

“Great case manager. Always responsive and caring.”

Kurt Maurer – Willowglen

Nominated by Movnir Corban – Alternatives in Psychological Consultation

“Very experienced case manager who always ensures that clients are taken care of. His clients are lucky to have him.”

Melissa Eckmann – St. Charles Youth & Family Services

Nominated by Movnir Corban – Alternatives in Psychological Consultation

“Very caring case manager who provides quality service to her clients. Very thorough and always ensures that client needs are met. The most caring person I have ever worked with. Families are lucky to have her.”

Upcoming Events...

MAY 2010

- May 5** **DHHS Centralized QA Mtg.**
9:00-11:00am WM – Room 212
- May 6** **Mgmt./Supervisors Meeting**
8:15-10:00am WM – Room 416
- May 6** **High Risk Reviews**
11:00-1:00pm WM – Room 253
- May 6** **Monthly Care Coordinator Mtg.**
1:00-3:00pm CHP Auditorium
- May 12** **Child Psych. Cons. – R-AJA**
12:00-1:00pm WM – Room 253
- May 13** **High Risk Reviews**
11:00-1:00pm WM – Room 253
- May 19** **Provider Meeting**
10:00-11:30pm WM – Cafeteria
- May 20** **Mgmt./Supervisors Meeting**
8:15-10:00am WM – Room 416
- May 20** **High Risk Reviews**
11:00-1:00pm WM – Room 253
- May 22** **Family Orientation**
11:00-12:30pm WM – Cafeteria
- May 26** **Child Psych. Cons. – Willowglen**
12:00-1:00pm WM – Room 253
- May 27** **High Risk Reviews**
11:00-1:00pm WM – Room 253

Quality Quote of the Month

“The quality of your work, in the long run, is the deciding factor on how much your services are valued by the world.”
- Orison Swett Marden (1850-1924)



Announcements...

Positive Recognition Awards

The following have been recipients of “Positive Recognition” awards:

Jermaine Reed - FreshStart

Nominated by Juliette Haven – Alternatives in Psychological Consultation

“Jermaine stepped up to help a child’s team that was in desperate need of emergency placement. He was very helpful and acted quickly. Great thanks to him!”

Eric Folds – Brighter Destinies

Nominated by Megan Larscheid – LaCausa, Inc.

“Mr. Folds has gone above and beyond to meet the needs of the child and family team! He has been very patient and dedicated, and his assistance is greatly appreciated!”

Editor

Debra Jansen, Consumer Relations Coordinator - (414) 257-6532.
For more information on Wraparound Milwaukee, go to our Website at www.county.milwaukee.gov and search using the keywords “Wraparound Milwaukee”.