Questionnaire: HIFI Wraparound Eligibility

HIFI Wraparound Eligibility

Instructions: The following diagnoses are not eligible for Wraparound BHH Services: Learning Disabilities in reading, mathematics, written expression; Motor Skills Disorder; Learning Disabilities Not Otherwise Specified; Communication Disorders (Expressive Language Disorders, Mixed Receptive Expressive Language Disorder, Phonological Disorder, Stuttering, and Communication Disorder Not Otherwise Specified).

1.Does member Have a diagnosis of a serious emotional disturbance or Autism Spectrum Disorder described in the DSM or have a diagnosis described in the current version of the Diagnostic Classification of Mental Health and Developmental Disabilities of Infancy and Early Childhood?
(Please select one.)

- ○ Yes
- ○ No

2.Has the child received and maintained a score of twenty (20) (Level IV) or higher on the age-appropriate Level of Care/Service Intensity tool completed by the Department or its Authorized Entity? (The age-appropriate Level of Care/Service Intensity tools are the Early Childhood Service Intensity Instrument (ECSII) for ages zero (0) to five (5), the Child and Adolescent Level of Care/Service Intensity Utilization System (CALOCUS-CASII) for ages six (6) to eighteen (18), and the Level of Care Utilization System (LOCUS) for members ages eighteen (18) and over.)
(Please select one.)

- ○ Yes
- ○ No

2.1.1.Please Provide Score

2.2.1.Please Provide Score

3.Member must meet one of the following criteria:
(Please select one.)

- ○ In the past twelve (12) months, has the child experienced multiple hospitalizations for behavioral health needs or have experienced a combination of hospitalization, crisis stabilization, and emergency department admission for behavioral health needs

3.2.1.Please explain

4.Have past or present experience with two (2) or more of the following (please select all that apply and explain):
(Please select between 1 and 5 items.)

- ☐ Involvement in the Department's or another state's child welfare system
- ☐ Disruption in the Department's adoption or placement process because of behavioral need
- ☐ Documentation of receiving behavioral health services as a result of a qualifying diagnosis
- ☐ Risk of homelessness or currently experiencing homelessness
- ☐ Risk for out of home placement or currently residing in an out of home placement

4.2.1.Please explain

4.3.1.Please explain

4.4.1.Please explain

4.5.1.Please explain

4.6.1.Please explain