

Request for Applications (RFA): Wraparound Agencies

Issued By: Magellan of Louisiana

Title: Procurement of Wraparound Agencies for Louisiana's CSoC

Purpose: Magellan of Louisiana, as the Coordinated System of Care (CSoC) contractor, is seeking applications from qualified entities to serve as Wraparound Agencies (WAAs) for each of the nine geographic regions of the CSoC. Applicants may apply for any number of geographic regions. These agencies will play a vital role in coordinating services for children and youth ages 5-20 with severe emotional disturbances and their families/caregivers, ensuring they receive the support they need. Each selected agency's final proposal will be appended to their contract and treated as a binding commitment to the implementation strategy and standards described therein.

Key Dates:

RFA Release Date: August 18, 2025

Potential Respondent Questions Due: August 29, 2025

Magellan Question Responses Posted: September 5, 2025

Application Deadline: September 26, 2025

Notify Finalists: October 6, 2025

Finalists Presentations: October 9, 2025 – October 10, 2025

Notify Providers of Decisions: October 15, 2025

Anticipated Contract Start Date: January – March 2026

All dates are subject to change at Magellan's discretion.

Selected WAAs will:

- Deliver High-Fidelity Wraparound Services: Use the standardized Louisiana practice model consistent with the National Wraparound Initiative's standards, ensuring fidelity through training, monitoring, and outcome evaluation.
- Ensure Administrative Accountability: Establish effective administrative systems, including policies for timely reporting, accurate data collection, and adherence to Magellan, Louisiana Department of Health (LDH), and federal guidelines.
- Strengthen Quality Improvement Practices: Implement continuous quality improvement processes, including regular fidelity assessments, performance measurement, and corrective action plans.
- Foster Collaborative Relationships: Build and sustain strong partnerships with behavioral health providers, community organizations, schools, and child-serving

systems such as DCFS, OJJ, LDOE, and school systems. Agencies must actively participate in coordinated planning efforts and demonstrate effective interagency collaboration.

- **Coordinate Crisis Services:** Collaborate with crisis intervention and stabilization providers and crisis systems to support community-based care and reduce out-of-home placements and hospitalizations.
- **Monitor Outcomes and Fidelity:** Fully engage in the Louisiana Wraparound Training and Coaching Model, and fidelity monitoring process established by Magellan and the Office of Behavioral Health to ensure high-quality Wraparound implementation and positive outcomes for children and families. Actively monitor the effectiveness of plans of care and services, including safety, clinical outcomes, and service engagement. A clinical director or clinician must be available to every Child and Family Team to answer family questions and ensure service recommendations and intensity are clinically appropriate.
- **Recruit and Train Staff:** Employ qualified staff, including Licensed Mental Health Professionals (LMHPs), Wraparound Facilitators, supervisors, Quality and Compliance staff, and administrative support, and provide ongoing training aligned with the National Wraparound Initiative standards, OBH and Medicaid regulations, and Magellan requirements. Wraparound Agencies must implement a robust recruitment and retention strategy to address systemically high turnover. This includes hiring, onboarding, coaching, and retaining skilled Wraparound Facilitators. Assignment decisions should account for staff experience and ability to serve youth with complex needs.
- **Adhere to Medicaid Behavioral Health Services Provider Manual, 1915(c) HCBS Waiver, and Medicaid Regulations:** Ensure all practices comply with the Louisiana Medicaid Behavioral Health Services Provider Manual, including service documentation, billing standards, and provider credentialing requirements, comply with all provisions of the 1915(c) Home and Community-Based Services (HCBS) Waiver, including person-centered planning, waiver eligibility criteria, and required assessments, comply with all Medicaid regulations. Agencies are responsible for supporting families with Medicaid enrollment, re-enrollment, and transitions to other coverage as applicable.
- **Promote Proactive Care Coordination:** Ensure timely communication and coordination across all child- and family-serving systems, including schools, courts, and medical and behavioral health providers. Proactively engage with partners to support positive outcomes for families.
- **Create Strong Provider Relationships:** Maintain consistent and effective communication with network service providers regarding Child and Family Team (CFT) scheduling, plan of care development, service delivery, and crisis response.
- **Ensure System Responsiveness:** Be responsive to the needs of courts, judges, and other child-serving systems by participating in multidisciplinary case staffings, providing timely, accurate, and professional documentation, and collaborating on service planning.

- **Safety:** To promote staff safety in field settings, agencies must develop protocols, deliver safety training, and provide appropriate supports.
- **Maintain Patient Safety:** Identify, address, and escalate risks to child and family safety, including urgent needs requiring immediate intervention, while promoting trauma-informed care practices.
- **Participate in Emergency Preparedness:** Collaborate with Magellan and the Office of Behavioral Health in hurricane and disaster response planning, outreach to ensure service continuity and family safety, and timely and accurate reporting of those activities.
- **Submit Timely and Accurate Data:** Maintain near real-time / real-time, high-quality documentation and reporting that support clinical decision-making, system performance monitoring, and contractual accountability. WAAs must establish strong internal controls to collect, validate, and submit timely, accurate data for all required deliverables. Consistent data errors or delays may affect system integrity and performance as well as reimbursement.
- **Demonstrate Partnership Values:** Operate as a dependable and collaborative partner to Magellan and the Office of Behavioral Health through professionalism, accountability, and mission-aligned leadership. Agencies must designate leadership-level staff to respond to Magellan, LDH, or other state inquiries within one business day. Participation in Magellan-hosted learning communities—covering facilitation, training, supervision, clinical and quality leadership—is required.

Eligibility Requirements:

Applicants must:

- Demonstrate experience managing wraparound or similar behavioral health programs for children/youth.
- Show financial solvency and compliance with state and federal standards (e.g., 42 CFR §438.116).
- Maintain a local office within the designated geographic region(s).
- Employ qualified staff, including LMHPs and individuals trained in the Wraparound process, with detailed policies for staff training and supervision.
- Implement internal controls, including rigorous auditing and monitoring practices, to ensure compliance with the CSoC SOP, Magellan policies, and LDH regulations.
- Ability to handle data exchange and reporting requirements as specified by Magellan and LDH, ensuring timely and accurate submissions.
- Demonstrate established relationships and formal agreements with community stakeholders, behavioral health providers, and child-serving systems.
- Comply fully with the Louisiana Medicaid Behavioral Health Services Provider Manual and 1915(c) HCBS Waiver requirements.

Application Requirements

Applications must include:

- **Organizational Overview:** Describe your organization's mission, history, and experience delivering behavioral health or wraparound services.
- **Service Delivery Plan:** Include details on how your agency will meet the requirements of the CSoC, including:
 - Provision of a Wraparound program to fidelity standards.
 - Ensuring quality assessments and family stories.
 - Coordinating child and family teams.
 - Creating high-quality Plans of Care.
 - Monitoring of Plan of Care (service) implementation and efficacy.
 - Addressing barriers.
 - Integrating reflective coaching into every aspect of practice.
 - Integration of crisis services, inclusive of LA Crisis Response System.
 - Responsiveness to and collaboration with state and local agencies.
 - Adherence to all applicable provisions in the Medicaid Behavioral Health Services Provider Manual and 1915(c) HCBS Waiver, including service authorization, documentation requirements, and person-centered planning.
 - Avoidance of conflicts of interest.
- **Administrative Accountability Plan:** Describe policies for ensuring compliance with reporting, data integrity, and regulatory requirements, including staff responsibilities for oversight and accountability. All key leadership roles (Executive Director, Clinical Director, Quality Director) must be approved by Magellan prior to service launch. Any changes in leadership must be reported to Magellan immediately.
- **Data Management Plan:** Applicants must describe their internal infrastructure and protocols for collecting, validating, and submitting member-level data on an ongoing basis. This includes, but is not limited to:
 - Dates of Child and Family Team meetings
 - Dates and outcomes of provider outreach for care coordination
 - Current living setting of members
 - Involvement with child-serving systems (e.g., DCFS, OJJ, etc.)
 - Status and dates of assessments, reassessments, and Plans of Care
 - Crisis events and resolution timelines
 - Family engagement metrics (e.g., contacts, no-shows, re-engagement attempts)
- **Quality Assurance Plan:** Outline processes for monitoring service quality, fidelity, and outcomes, including regular audits, reflective coaching, stakeholder feedback, and corrective actions. Applicants must submit a quality plan that reflects the agency's commitment to partnership with Magellan and the Office of Behavioral Health. The plan should demonstrate proactive performance monitoring, responsive remediation, and continuous quality improvement.

- Staffing Plan: Detail the qualifications, roles, and responsibilities of key required staff (e.g., Wraparound Facilitators, Supervisors, Coaches, Clinical Director, Quality Assurance Specialists), with plans for training, supervision, professional development, and adherence to Wraparound fidelity standards.
- Budget Proposal: Submit a detailed budget, ensuring alignment with Medicaid reimbursement guidelines.
- Letters of Support: Provide letters from community stakeholders and partners demonstrating support for your agency's role.
- Evidence of Accreditation: Submit documentation from the Commission on Accreditation of Rehabilitation Facilities (CARF), Council on Accreditation (COA), or The Joint Commission (TJC), or prepare to seek accreditation.
- Compliance Statement: Confirm adherence to all state and federal requirements, including HIPAA, CSoC SOP, Magellan policies, and the Medicaid Behavioral Health Services Provider Manual and 1915(c) HCBS Waiver.

Evaluation Criteria:

Applications will be evaluated based on the following criteria:

Organizational Capacity and Experience (10 points)

- Demonstrated success delivering wraparound or similar services.
- Adequate administrative structure and infrastructure.
- Local presence and established relationships in the geographic region(s).

Service Delivery Plan (20 points)

- High-fidelity wraparound approach with clear strategies for assessment, engagement, child and family team coordination, crisis response, and plan of care management.
- Describes solution-focused engagement strategies and caregiver education on services (e.g., PSR vs. CPST vs. MST).
- Incorporates crisis service education and access pathways.

Administrative Accountability and Oversight (15 points)

- Clear structure for executive, clinical, and quality leadership oversight.
- Internal controls for staff supervision, documentation accuracy, timely completion of core activities (CFTs, assessments, POCs).
- Demonstrates leadership responsiveness to Magellan and OBH requests.

Continuous Quality Improvement (CQI) Plan (15 points)

- Proactive use of internal data to monitor and improve service quality, engagement, fidelity, and outcomes.
- Describes internal CQI staffing, regular reviews, and corrective action planning.
- Demonstrates commitment to reflective coaching and ongoing learning.

Staffing and Training Plan (15 points)

- Roles and qualifications for all key staff (Facilitators, Supervisors, Clinical Director, QA).
- Strong onboarding, supervision, and retention strategy.
- Training plan includes family engagement, motivational interviewing, solution-focused modalities, and education on behavioral health services.

Data Management and Reporting Plan (10 points)

- Ability to collect and submit member-level data (e.g., CFT dates, provider outreach, system involvement, POC timelines).
- Ensures data timeliness, accuracy, and alignment with Magellan/LDH specifications.
- Describes infrastructure and personnel responsible for data reporting.

Budget and Financial Management (5 points)

- Realistic, Medicaid-aligned budget and justification.
- Supports staffing and services as proposed.

Community and System Partnerships (5 points)

- Formal agreements with community providers, schools, DCFS, OJJ, etc.
- Describes cross-system coordination, engagement in multidisciplinary staffing, and judicial responsiveness.

Accreditation and Compliance (5 points)

- Accreditation or plan to obtain (CARF, COA, TJC).
- Full compliance with HIPAA, Medicaid, 1915(c) HCBS Waiver, and LDH policies.

Additional Information:

This RFA is governed by the terms and conditions outlined in the CSoC Standard Operating Procedure, the Medicaid Behavioral Health Services Provider Manual, the CSoC 1915(c) HCBS Waiver, Louisiana Department of Health requirements, and applicable federal and state regulations. Applicants are strongly encouraged to review these documents before submission. Specific reference materials include:

- National Wraparound Initiative's standards and fidelity tools
- CSoC SOP requirements (2024 updates available at [CSoC SOP 3-2020.pdf](#))
- Medicaid Behavioral Health Services Provider Manual
- 1915(c) HCBS Waiver guidelines <https://wms-mmdl.cdsvdc.com/WMS/faces/protected/35/print/PrintS>

Submit questions, responses and supporting documentation to lacsocproviderquestions@magellanhhealth.com.