

**Children's Long Term Support (CLTS) Council Meeting**  
**Wednesday, August 29, 2012**  
**10:00am – 3:00pm**  
**LaQuinta Hotel**  
**5217 East Terrace Hotel**  
**Madison, WI 53178**  
**Minutes**

Council Chairperson: Liz Hecht

Council Members: Hugh Davis, Sharon Fleischfresser, Melanie Fralick, Lynn Green, Barbara Katz, Keith Keller, Tom Masseau, Jodi Pelishek, Walt Schalick, John Shaw, Julie Turkoske

DHS Staff: Gail Propsom, Julie Bryda, Pam Garman, Jill Kelly

Guests: Sally Mather, Melissa Stolz  
Liz Scudder, Cindy Zander, Office of Inspector General

**I. Welcome & Introductions – Liz Hecht**

- a. Review of Agenda
- b. The council completed introductions and welcomed council members and guests.

**II. Children's Long-Term Support Retreat & Council Membership – Gail Propsom**

- a. The projected date for the CLTS Retreat will be October 23-24, 2012. A venue has yet to be decided however it will be within the Madison area. Strategic planning on CLTS strategies will be discussed during this retreat. The Council was invited to contact Jill Kelly regarding any interested parents who should be included in the retreat invitation.
- b. The CLTS Council currently consists of 25 voting members appointed by the Secretary of the Department of Health Services (DHS). Members include parents whose children have diverse long-term support needs, county waiver agencies, advocacy agencies, as well as other state departments and provider agencies. There are currently several vacancies on the CLTS Council, especially members representing parents with children receiving CLTS Waiver services.
- c. The CLTS Council meets on a quarterly basis, or more frequently if necessary. The mission of the CLTS Council is to promote the vision and principles for a system of support for children with disabilities, from birth

to 21 years of age and their families. The Council advises DHS on goals and strategies for implementing statewide long-term services and supports for children and families. This is accomplished through the development of initiatives including; access, choice, coordination, quality, and financing.

- d. There is an updated letter posted on the CLTS Council’s website, detailing the membership application process. Potential members are encouraged to apply. To find out more about the Council and the application process please visit the website at: <http://cltscouncil.wisconsin.gov>.

**III. Family Support Program Sub-Committee Policy Recommendations – Julie Bryda, Bureau of Long-Term Support (BLTS)/Children’s Services Section (CSS)**

- a. A CLTS Council Family Support Program subcommittee has been formed to revise the current policy guidelines for the Family Support Program (FSP).
- b. The FSP guidelines have not been updated since 1998, and the revisions are hoped to better address the current needs of families, while meeting the original intent of the FSP. After the revised guidelines have been approved by the Department, statewide training to county service coordinators will be conducted. The FSP sub-committee reviewed the following policy areas:
  - FSP needs assessment and plan development is inconsistent throughout the state and did not meet the basic requirements of the Family Support Program Administrative Rule, DHS ch. 65.
  - FSP funds are being used for goods and medical treatment that are not evidence-based, and proven to be effective for the condition.
  - FSP guidelines do not include a requirement for caregiver background checks for individuals having direct access to participants. DHS ch. 65 does not address health and safety issues.
  - FSP funds are increasingly being used for poverty related expenses and services, rather than disability related services, which is beyond the scope of the original intent in the program (e.g., food, rent related expenses, furniture, services in workshop settings, legal fees, etc.).
  - FSP funded goods and services are subject to the state “allowable cost” methodology for rate settings. DHS needs to provide guidance to county waiver agencies regarding the customary allowable cost methodology.
    - High number of requests being submitted to DHS for variance to increase FSP funds over the \$3,000 cap (up to \$10,000). No

increased trends in requests for respite or housing modifications. Problems seem to be programmatic more than family changes.

- FSP is routinely being used for services and expenses that should be covered under the Medicaid or EPSDT programs, but have not been approved for payment.

## **LUNCH**

### **IV. Approval of Minutes**

- a. Lynn Green made a motion to approve the meeting minutes of June 6, 2012; Jodi Pelisheck seconded the motion, the motion carries.

### **V. Personal Care Screening Tool Status Update – Liz Scudder and Cindy Zander, Office of Inspector General**

- a. Nurse practitioners from the DHS Office of Inspector General provided Council members with a brief summary of the Personal Care Screening Tool (PCST).
- b. The PCST was designed to collect information on an adult's ability to accomplish activities of daily living skills, instrumental activities of daily living, medically oriented tasks delegated by a registered nurse and the members need for a personal care worker to assistance with these activities in the home. The screen may not include services provided to the member by informal, unpaid supports such as family or friends. The PCST must be completed based on a face-to-face evaluation of the individual in his or her home.
- c. Experienced professionals complete the PCST who must meet the following qualifications:
  - Registered nurse employed by or under contract with the Medicaid-certified personal care agency.
  - Experienced professional who has completed the PCST training course, passed a certification exam, and is able to access and administer the Adult Long-Term Care Functional Screen (LTC FS).

### **VI. Division of Long Term Care (DLTC)/Bureau of Long-Term Support (BLTS) Updates – Gail Propsom, Director**

- a. BadgerCare Plus policy changes were shared with the Council that have approved by the Centers for Medicare and Medicaid Services (CMS) for non-disabled, non-pregnant adult BadgerCare Plus members above 133% of the federal poverty level, as part of the Medicaid Savings Initiative.

- b. BadgerCare Plus eligibility and premiums for children, including Katie Beckett are NOT impacted by these policy changes.
- c. DLTC Youth in Transition workgroup was established to ensure youth who are graduating from high school and exiting out of the CLTS Waivers and transiting into Family Care or IRIS maintain access to employment and vocational opportunities.

**VII. Council Budget Proposal – Liz Hecht, Chairperson**

- a. A final draft proposal has been developed for the 2013-2015 budget and the following items are addressed:
  - Funding for CLTS Waiver Services
  - Provide access to short-term assistance, including service coordination to families and children eligible for CLTS Waivers, but on the waiting list
  - Develop family outcomes measure and implement a family-based outcomes survey
  - Reduce administrative costs
  - Provide seamless transition for youth exiting high school and transiting into Family Care/IRIS/Partnership
  - Revise Family Support Program regulations to allow unspent funding from one year to be carried over to the following year

**VIII. Wrap-Up**

- a. Next CLTS Council scheduled meeting date is December 5, 2012. Suggested agenda topics include:
  - Invite Brett Davis, DHS Division for Health care Access and Accountability (DHCAA) for follow up regarding Medicaid issues
  - Family Support Program subcommittee recommendations
  - Youth in Transition workgroup update
  - Invite Beth Swedeen for update on *Let's Get to Work Grant*
  - Birth to 3 1937 State Plan Amendment (SPA) Update

**IX. Adjourned 3:02 PM**