

Wisconsin Council on Children with Long-Term Support Needs
Council Meeting

Minutes
July 27, 2009
LaQuinta Hotel
10:00 a.m. – 3:00 p.m.
Madison, WI

Chairperson: Liz Hecht

Members Present: Keith Keller, Michelle Urban, Melanie Fralick, Glen Johnson, Julie Turkoske, Sally Mather, Lynn Breedlove, Hugh Davis, Amy Whitehead, Jennifer Stegall, Barbara Katz, Julie Bryda, John Shaw, Beth Wroblewski

Guests: Reed Bonner, Department of Health Services (DHS)

Staff Members: Theresa Walske, Katie Sepnieski, DHS

I. Welcome and Introductions

- a. Liz Hecht welcomed everyone to the council meeting and introduced the topics on the agenda.
- b. Introduction of council members and guests.

II. Children's Initiatives 2009-2011

Additional Funding for CLTS Waivers – Beth Wroblewski

- a. An additional \$18 million All Funds was provided by the 2009-2011 biennium budget to fund services for children through the Children's Long-Term Support (CLTS) Waivers.
- b. It is the intent of the Department that in the 2009-2011 biennium approximately 921 children currently waiting for services will receive funding through the CLTS Waivers statewide.
- c. The Children's Services Section is working to identify and support counties to utilize the funding so that children and families will have access to needed services and manage under spending.
 - i. In the 2007-2009 Biennium the Department issued "base and census" slots by target group. This biennium the Department is proposing to give each county a number of slots and provide "just in time" contracting. When an approvable plan is submitted by a county, funds will be added to the county's contract.

- ii. The Department is training staff at TMG who have historically reviewed plans for the COP Waiver to review CLTS plans. This will allow Children's Services Staff time to provide technical assistance to counties.
 - iii. Corrective action plans will be initiated in counties not utilizing waiver funding.
 - iv. Fiscal staff will report to the Children's Services Section on a quarterly basis how many new children have been serviced and how much funding has been used.
 - v. Transition funding will be made available for counties to support individuals 17 years old transitioning in to Family Care or 21 years of age transitioning out of the CLTS Waivers.
- d. The Council had some concerns regarding the use of the transition funding.
- i. A county may not be participating in Family Care and not have the capacity to serve a child as an adult. For example, a child could receive support using transition funds through the CLTS Waivers and then the child will be referred to an adult funding source and placed on the waitlist.
 - ii. Staff capacity at the counties is an issue. There is much work involved to serve a child at age 17 ½ for 6 months.
 - iii. It may be unlikely that county boards will support additional positions
- e. At the next the next Council Meeting, Council Members requested the Department address the report from TMG on county capacity and provide information of progress of use of new funding.

Autism Legislation – Beth Wroblewski

- a. The Children's Services Section is working with the Office of the Commissioner of Insurance as part of a workgroup consisting of insurers, parents, and providers to look at structure of insurance policies governed by state rules.
- b. It is estimated 25-33% of the insurance plans in Wisconsin will be affected starting January 1, 2010. It is anticipated, the insurance legislation will reduce the State waitlist for intensive services because children may have insurance and will not need the CLTS Waiver funded service.
- c. Legislation calls for intensive and continued treatment to, maintain gains for individuals with Autism Spectrum Disorders. The rule has set the Intensive level at \$50,000 floor/year for up to four years and \$25,000 ongoing/year.

American Recovery and Reinvestment Act (ARRA) – Beth Wroblewski

- a. Three budget proposals were passed in the Biennium Budget for the Birth to 3 program providing additional federal funds to the program: cost reporting through Wisconsin Medicaid, reimbursement of services provided by educators through Wisconsin Medicaid, and the initiation of a Birth to 3 Waiver.
- b. Counties will need to restructure how to bill services to Medicaid. Efforts to support counties will be provided by the Birth to 3 Team.
- c. In addition to initiatives supported through the Biennium Budget, the Birth to 3 Program received almost \$7 million in ARRA funds. This is one time funding and cannot supplant current counties Maintenance of Effort.
- d. Approximately \$3 million will be available to counties. A simple application process will be required where counties will identify how they will use the funds. High level of transparency and accountability is required with the use of these funds. The counties may use the funds for legacy building, personnel, infrastructure, or direct services.
- e. The additional funds will be used in statewide Birth to 3 initiatives and infrastructure building by the Department.

Other Budget Items – Beth Wroblewski

- a. Family Care expansion continues. Counties that are in the middle of Family Care expansion and those entering Family Care expansion will have 36 months to complete the process.
- b. Furloughs for State Staff will occur. Four days designated each fiscal year: Columbus Day, President Day, the day after Thanksgiving, and the Friday before Memorial Day. An additional 4 days each fiscal year can be determined by each employee. It is anticipated State Staff response time may be affected.

LUNCH BREAK

- III. Review of February 24, 2009 meeting minutes
 - a. John Shaw made a motion to accept minutes.
 - b. Julie Turkoske 2nd motion.
 - c. Motion passed unanimously.

- IV. Children Long-Term Care Redesign – Beth Wroblewski
 - a. Discussion with the CLTS Council Members regarding the next steps of the Children’s Long-Term Care Redesign.
 - b. Managed Care for children is still an option, but there is a question if this is the most effective approach.

- i. Piloting managed care for children is difficult because it is difficult to achieve critical mass.
 - ii. To obtain critical mass statewide may allow about three Managed Care Organizations, limiting families' option.
 - iii. There may not be as great of a cost savings in a children's managed care organization as an adult's managed care organization.
- c. Council Members expressed willingness to look at other models and expressed the goal is to meet the principals of Children's Long-Term Care Redesign through coordinating services across funding systems and a less complex system to meet coordination, uniform services for families across the state, and eliminating waitlists.
- d. Council Members expressed a need to support county infrastructures. It may not be fiscally feasible for a county to support a single service coordinator for one or two families.
- e. Council Members discussed other possible options such as an IRIS model for children, cash 'n carry, and Lutheran Social Services Family Prevention Initiatives (FPI) as potential approaches.
- f. Through the Katie Beckett Contract to the Department, Sally Mather is researching a single point of entry. Currently data gathering is occurring to determine if consolidating eligibility for all long-term care services is an option.
- g. Over the biennium, the Department will work with counties to meet the needs of children and families. The Department will provide comprehensive outreach to counties, measure infrastructure, and address plan development.
- h. Beth Wroblewski suggested a possible workgroup in 2010 to review current structures, define concepts and ideas to achieve what is important, and encourage multi-county or regional coordination. It may also be necessary for a group to look at single point of entry.

V. Transition to Family Care-Carrie Molke, Supervisor Office of Resource Development

- a. Carrie Molke and Julie Bryda discussed the transition of children receiving services through the CLTS Waivers into Family Care.
- b. Council members shared experiences regarding enrollment counselors who did not share information about IRIS and families' difficulty obtaining an adult disability determination.
- c. The Department provides training to ADRCs. The Department is now offering training to counties. It is an expectation that everyone hear about all options. A survey of participants will also be conducted.
- d. Julie Bryda indicated the Children's Section is working with the Disability Determination Bureau to look at options for easing burdens to families such as possibly changing the allowable age to apply for a DDB to 17 years 6 months.

- e. Children's Services Staff is working with county CLTS staff to assure an individual is receiving services through either IRIS or a Managed Care Organization prior to closing the CLTS Waiver services. A document is being developed to assist CLTS Service Coordinators and families.

VI. DHS Updates-Julie Bryda
CLTS Renewal

- a. The CLTS Waiver is due to be renewed November 2011.
- b. Reed Bonner joined the CLTS Team to complete data analysis related to the Waiver Renewal.
- c. The Family Survey is anticipated to be released in the Fall of 2009. It will be available in Spanish. Council members requested a report on the results of the Family Survey.

Family Support Program

- a. The Family Support Data, Waitlist numbers, and children being served through the program was reviewed
- b. A phone conference is held monthly with county staff to discuss different topics. The Family Support Program was a topic of one of the discussions.

Vacant Council Positions

- a. There two open Council positions; one parent and one county representative. The Department is reviewing the applications and will forward to the Secretary's Office for appointment.

VII. Budget Discussion-Fredi Bove, Interim Division Administrator

- a. The new funding provided in the 2009-2011 biennium budget would come from new GPR funds (\$50,000/year). The biggest amount of GPR funds would come from the current biennium that has not been fully expended in the last budget. This is about 50% of the amount that was allocated in 2008-2010. This would be a reallocation of funds.
- b. The parental payment limit revenue over the last 4 years totals about \$800,000 that is being reallocated into the program. The parental payment limit continues to be collected.
- c. COP funding will not be reduced to counties but it will be added to the Medicaid budget. Family Support funding will not be cut.
- d. The Council subcommittee did create a letter to share with legislators which addresses the three prong approach. However with the budget not including funding for demonstration projects is there another way the Council should move forward? Council discussion:
 - a. The resource center initiative that is moving forward with the two Departments is a great first approach. This could address issues with families that need all different types of services.

- b. Families that have parents being deported and children that are citizens are placed in foster care is concerning. Immigration status is an issue.
 - i. Determining where the starting point is for prevention can be difficult. The Department of Children and Families is having a strategic planning meeting to discuss this type of issue.
- c. It is important to keep the current money in the budget. There may be a better way to manage the programs in order to serve children that have complex needs.
- d. The capacity issue is concerning, there needs to be a way to use the funds in this budget otherwise there will not be any funds in the next budget.
- e. At a national level children with long-term needs have not been addressed. There may be data and research nationally but it will need to be reviewed to see if it meets the needs of the Council and the momentum to move forward.
- f. In this budget cycle it is possible to begin a demonstration project with administrative funds, and clustering slots. Counties that have been leaders for CLTS services may have the infrastructure to set-up a system.
 - i. Follow up of having families present on how the program worked for them would be beneficial.
- g. The subcommittee will revise the one page talking points to include the discussion from today. The one page document will include accurate wait list numbers and children being served. The two Departments will have a joint effort to determine next steps.
- h. It may be beneficial to ask young families what their needs are. It may be different from what the families with older children need. This could provide a good framework on what the actual issues are.

VII. Other issues:

- a. The transitional slots as a part of the CLTS Waiver funding that have been offered to counties will continue. The children placed on these types of slots would transition to FamilyCare when the county begins the program. They would not be a part of the groups that are waiting during the 2-3 year transition period. Counties can continue to apply for the transitional slots.
- b. The Governor's budget proposes to implement a transportation manager for Medicaid SMV and common carrier services statewide. The manager will provide a centralized scheduling, dispatch, and provider reimbursement.

VIII. Wrap-Up

- a. Next meeting date October 21, 2009 LaQuinta Hotel