DEPARTMENT OF HEALTH SERVICES STATE OF WISCONSIN

F-01922 (11/2017)

OPEN MEETING MINUTES

Instructions: F-01922A

Name of Governmental Body: IRIS Advisory Committee	Attending:
Time Started: 3:00 PM Date: 9/25/2018	Committee Members: Monica Bear, Julie Burish, Martha Chambers, Dean Choate, Fil Clissa, John Donnelly, Mitch Hagopian, Maureen Ryan DHS Staff: Amy Chartier, Betsy Genz, Sheldon Kroning, Maurine Strickland, Suzanne Ziehr Others: Sue Urban, Tara Treglowne, Alexa Butzbaugh, Vicky Gunderson, Kathi Miller, Anne Karch, Molly Brandt, Donna Blend, Katie Carter, Jeff Carter, John Carter, Joe Cornelius, Dawn Green, Bev Brown, Lea Kitz, Katherine Kasabuske, Wendy Kaplan, Rhonda Liebetran, Cindy Studler, Karrie Knapp, Kim Rux
Lussier Center, LePine Room, 3101 Lake Farm Road, Madison, WI 52	Presiding Officer: Betsy Genz, Associate Director, Bureau of Adult Long Term Care Services

Minutes

Meeting Call to Order

- Introductions of those present and on the phone
- Minutes reviewed, Mitch moved to approve minutes, Martha Chambers approved July minutes and Julie Burish seconded.
- Committee Suggestion:
 - o Provide minutes earlier
 - o Action steps lined up easier to see
- · Review of last meeting
 - o NCI suggestions survey is prepared annually already completed for 2019
 - Transportation is a sub charge for LTCAC
 - Lots of discussion around employment
 - Satisfaction surveys for IRIS and Family Care will have data next year
 - o Ombudsman letter request for comments was sent out
 - o Participant education manual feedback going through executive routing process currently
 - o Advisory Committee Composition is pending

Employment Presentation

- DHS representatives went through a presentation on Competitive Integrated Employment
- Provocation Services
 - There is not currently a distinction between community based and facility based prevocational services in the waiver. Looking at that to be added with the waiver renewal

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 Prevocational services are time limited, based on the individual. They should be providing 6 month progress notes showing progress towards moving to integrated employment.

- Working to align waivers more clearly between programs:
 - IRIS talks specifically about a period of time and that if they aren't employed in 2 years, must take a fresh look at services
 - FC it is different
- o There is a difference between someone saying they don't want to be employed vs. working towards employment. Time limit is not to be punitive.
 - Looking to partner with DVR and assist participants to have informed choice.
- o With waiver renewals we are looking at what other states are doing and how service definitions are written and updating ours

Employment data

- NCI data is only related to those with developmental disability not those with a physical disability
- We are unable to drill down to see differences between group and facility settings for employment at this time. Some of that data is collected within the functional screen
- o I The department will be using UI data to validate employment data collected by MCOs and ICAs.
- o Currently job reporting is participants reporting that they have a job or reporting by vocational agencies providing supports
- o It will be a couple years before baseline data is available for employment. Consistent data is needed from the same source
- Working on communications with DVR and DHS on those wanting to work in the community. DHS and DVR do not currently have a data sharing agreement. Working on MOU between DWD/DVR and DHS to help with this
- o Main focus is on how to ensure individuals have a meaningful day

SELN

- DVR has taken a role in building capacity in providing jobs. The Best Practice Integration Resource Section is working with DVR
- Committee Suggestion: Business Leadership Network or Disability Now out of Whitewater is working on this also. Should connect with them. Julie Burish will send contact information to Amy Chartier and Lindsey Kreitzman
- Increased Community Efforts
- Data on children is being gathered from their plans or utilization of services, DPI is involved with youth in transition. Data for children is outside of our data system.
- The managed care rule quality strategy went out for public comment. The initiatives will increase over the next few years.
- Looking to see what crossover can occur related to the Family Care Pay for Performance into IRIS
- Additional Information
- There is an external workgroup meeting every other month
- Working on what information to provide individuals
- Participants need education on what would happen to benefits if they are employed

Self-Direction Workgroup

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• Composition: 4 IRIS Advisory Committee Members, Amy Chartier, Sheldon Kroning, and a member from the Family Care Oversight team

- Goals of the workgroup
 - o Identify, through discussions with advocates and stakeholders, what Self-Direction is and what it needs
 - Better define support broker services
 - o Determine whether it is Self-Direction if only paid people are advocating for you
 - o Service definitions can be broad and decisions are then less clear, want it to be clearer when DHS approves or denies services
 - Help eliminate confusion, make definitions so individuals know what services can do for them.
- Family Care is part of discussion so definition is same/similar across the programs
- Work from workgroup will be brought back to the committee
- No contracted agencies will be invited to participate
- Email Suzanne Ziehr if interested in participating and can attend the scheduled meetings.
- 4 meetings will be scheduled, all in person at DHS
 - o May be more meetings after the initial 3
- Attempt to start having this conversation and represent advocates, participants, and families

Department Updates

Charter

- DHS would like committee feedback
- Draft charter will be sent out
- o Charter review meeting in October will be sent out, the meeting can be over the phone or in person
 - Proposed dates were shared with committee members
 - This meeting will be just for committee members
- o Final review of Charter will occur at November committee meeting

HCBS

- o Focus on non-residential settings review of compliance and heightened scrutiny for residential settings
- For Heightened Scrutiny, five settings were reviewed so far
 - DHS is waiting for feedback from federal government
 - Ultimately, there are 80-100 that will need review out of 5000
 - This will occur after feedback from the federal government is received
- o Non-residential settings benchmarks are being determined and piloted with 5 businesses
- o The DHS Contractor (PCG) will take over and conduct reviews of non-residential settings in 2019 PCG is contractor

EVV

- o There will be more dialogue and stakeholder engagement, plans will be coming out
- Deadline to be implemented in 01/01/2020 with a potential for extension to 1/1/2021
- → There will be one vendor and providers will not pay for services

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Gov-D

- o Request sent for Family Care waiver renewal ideas
- o Looking to align IRIS waiver and Family Care waiver service definitions
- o Comments due October 10, 2018
- DHS will send link out for submitting suggestions

Staffing update

- Hired contract manager Karina Virrueta

 starts 10/01/18
- o John Galetka hired into state position
- o Positon posted for policy analyst, will ultimately hire 2, 1 recruited at a time
- o WISITS positions will occur after the policy analyst

Participant Education Manual

o Has been routed through state approval process.

Feedback Requested from DHS

 When DHS sends documents to committee members for feedback, committee members are encouraged to reply even if to confirm you are okay with the documents.

Public Comment

- Anne Karch guardian for 32-year-old participant Participant was in Family Care before. Quality initiatives #4 need continuous feedback. The survey is a onetime shot for people and people get missed with a survey. Have a wider response from user groups, ICA, FEA, participants and guardians such as using WISITS, Quality and personal care, Supported employment, transitioning from school to adult world. Move IRIS Advisory Committee meeting around the state to reach more. This would allow for more people to attend and participate in public comment.
- Katie Carter Address caregiver shortage as-health and safety as required of waiver, complex medical participants should be included in IRIS as it was said by a committee member that they did not want them to participate, shared statistics regarding pay rates of employees being at below poverty rate. Shortage in workforce means that participants have missed meals and medications due to staff shortage. Request all committee members prioritize the shortage in workforce.
- **Jeff Carter** Two sons who are participants in the IRIS program. Regarding future role of Support broker role and consultants. This committee should include support brokers who can describe services provided to participants and the benefits that are provided.
- John Thank you for having program.
- Wendy Kaplan Has a 31 year old son in IRIS. Question: Is a revision planned for the IRIS policy manuals if so Wendy would like to provide suggestions to anyone working on that. She expressed concerns with functional screen not adequately addressing behavior. SDS workgroup It is critical who will be on this families and people/friends should be included in the definition otherwise those with severe disabilities wouldn't be included in IRIS.
- **Joe Cornelius** Has notes wants to share separately definitions of phrases, appeals with fair hearing 30 days to respond is not adequate.
- **Dawn Green** Involved with IRIS for nine years, since the inception. Used support broker a couple years ago personal care workers and SHC workers in home, one worker overbilled because of the hours. She signed some time sheets and then worker signed some

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herself – got another agency to take over her personal cares. Now switching FEAs. Support broker saved her because of everything going on with her supports and staff. They helped her clean house with care workers and get back on track. Life is now running smoothly thanks to support broker.

DMS Long Term Care Quality Strategy

- Went through 6 quality indicators
- Looking for evidence based practices to measure program quality.
- Committee Comment.
 - o Evidence based practice can work against innovation you need to take risks to try something new
 - Sometimes best evidence is if it worked for a particular person
 - o Can people live the lives they want to live?
 - o How do we market more of what IRIS is so people know what to ask?
 - o How do you know what are the right questions to ask?
 - o How do we know that people need long term care services are receiving Long Term Care Services?
 - Look at how social involvement affects mental health
 - o Indicator #3
 - look at those using a limited amount of service codes
 - Look at utilization at a macro level
 - Look at provider availability
 - o Indicator #4
 - Teach participants to put a plan together first
 - Indicator #5
 - Workforce crisis provide accurate information vs. workforce issue
 - Indicator #6
 - Learn from each other
 - Do participants know how to self-direct
 - Develops cohorts
 - Difficult to share in rural areas
 - Not one model works for all
 - Different age populations have different needs
 - How do you get information out to other participants
- In past DHS measured timeframes of each step to see where logjams were, and see how long it takes to correct when there is an error.
- ICA/FEAs working on onboarding providers so they are not lost.
- Committee Comment:
 - Length of time to hire PHWs some of the workers end up finding another job. When there is an error or issue the worker and participant don't always know
- State is considering doing webinars for some ICA and FEA training topics
- Committee Suggestion:
 - o Consistent training for everyone across the state ICAs and FEAs shouldn't' be responsible for their own training.

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Committee Website

• Reviewed draft of webpage, DHS will provide a link to the committee when the webpage goes live

• Committee suggestion:

o Place to provide public comments or link for how to send them in

TMG Emergency Response to Flooding

- ICs are responsible to ensure safety of participants during a disaster
- TMG local leadership reaches out to other teams and requires team to check in with their participants
 - o Teams look at the availability of food, medicine, cares coming in, need for electricity
 - o Teams share resources community has available
- Teams also spent time prior to events making sure participants have a backup plan
- TMG can pull up participants within a specific area and target them for assistance
- ICs also communicate with DHS so DHS is aware of what is going on
 - o DHS is able to send out blasts through WISITS about severe weather issues
 - o Many times the ICAs know about issues before DHS does
 - o Independent living centers (ILCs) get calls from crisis responders
 - ICAs contact DHS Quality Assurance Specialist if there is an emergency, Budget Amendments that need to go through and usually can be completed in a day

• Committee Suggestions:

- o Have multiple groups checking in on each person
- o Have interpreters set up as part of the emergency responsiveness plan

Budget Amendments and One-Time Expenses

- Walked through flowchart handout
- One-time expenses accessibility assessments can take a long time
 - o This can be due to the provider and how long it takes for them to complete the assessment
- How do we get these steps done quicker with keeping program integrity
- Committee can review flow, look at work instructions, and offer suggestions for improvement
- The budget amendment takes 15-16 days from when need the need is identified to when DHS receives complete package to review request
- DHS is not maintaining a list of providers for services
- DHS is looking for most cost effective service, this is not always the cheapest solution
- DHS is Looking at putting 3 tear offs on the bid sheet so all providers/contractors have the same information on what is required/needed
- If participants cannot find 3 bids, participants can list who they tried to contact and who refused to provide bids.
- For IRIS, bid needs to be specific to the recommendation
 - o Participants can pay difference, if they want something IRIS won't pay for (specific to onetime expense modifications)
- Any questions on Budget Amendments or One-Time Expenses, reach out to Sheldon Kroning
- Participants should know why something was denied, a detailed description is included in the Notice of Action denying the request
 - o Participants should always be receiving a Notice of Action from either the ICA or DHS

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Future Agenda Items

- Follow-up Charter discussion
- SDS workgroup update on progress
- Background checks
- IAC composition / applications
- Lea Kirz to present on the Grievance and Appeals summary, this presentation will coordinate with the timing of her Long Term Care Advisory Council presentation
- 1 contractor from group (FEA, ICA and SDPC) can participate in charter discussion call
- Additional items from the list generated earlier in the year will be added

Main action items:

- SDS workgroup committee members who would like to participate should email Suzanne
- Possible charter meeting dates DHS will send out and committee members should let us know which work for them
- DHS to send out email address for Family Care Waiver idea submissions.

Prepared by: Suzanne Ziehr on 9/25/2018.

These minutes are in draft form. They will be presented for approval by the governmental body on: 11/27/2018