

## OPEN MEETING MINUTES

Name of Governmental Body: Wisconsin Long Term Care Advisory Council (WLTCAC)			Attending: Allison Cramer, Beth Swedeen, Chris Witt, Don Wigington, Donna Hawley, Elsa Diaz Bautista, Eric Kostrzak, Jason Glozier, Jennifer Jako, Jessica Trudell, Jill Jacklitz, John Schnabl, LaVerne Jaros, Linda Bova, Lisa Davidson, Mackenzie Wann, Martha Cranley, Mike Pochowski, Sara Muhlbauer, Shanna Jensen, Stacy Ellingen, Tina Anderson
Date: 1/14/2025	Time Started: 9:33am	Time Ended: 12:32pm	
Location: Virtual Zoom Meeting			Presiding Officer: Jason Glozier

### Minutes

**Members absent:** Cindy Bentley, Joel Gouker, Karina Chelsky, LaWanda Calhoun

**DHS Staff present:** Alicia Boehme, Brenda Bauer, Carrie Molke, Helen Sampson, John Grothjan, Joyce Vue, Kevin Coughlin, Nicole Schneider

### Meeting Call to Order – Jason Glozier

- The meeting was called to order at 9:33am
- DHS would like to apologize for cancelling the November 2024 meeting. As we noted in our email at the time, several of our presenters had unexpected changes to their availability. Due to public meeting laws, we could not update the agenda within 24 hours prior to the meeting. Cancelling a meeting is never ideal, and we apologize for the inconvenience. We were able to move some of the speakers from the November meeting to today's meeting and we doubled the amount of time we have available for public comment.
- Council introductions were made
  - Welcome our new members – Martha Cranley, Allison Cramer, and Tina Anderson
- Minutes from September meeting reviewed
  - Motion to approve by Elsa Diaz Bautista. Seconded by Linda Bova.
  - None Abstain.
  - Minutes approved.

### Updates from Previous LTCAC Meetings – Jason Glozier, Nicole Schneider, Kevin Coughlin

- Medical Assistance Purchase Plan (MAPP)
  - DHS planned to implement significant changes to MAPP premiums on 7/1/2020. However, because of the PHE, MAPP premiums were suspended.
  - MAPP premiums were reinstated in August 2024.
    - Prior to reinstatement, DHS removed its 6-month restrictive re-enrollment period policy.
    - DHS notified MAPP members about premium reinstatement through letters and notices leading up to the month of August.
    - DHS also added a new option for members to pay online.
  - When premiums were reinstated, MAPP members experienced challenges with making premium payments.
  - To address these issues, DHS temporarily paused disenrollments from MAPP due to non-payment of premiums starting in September 2024. Also worked with MCOs and IRIS agencies to restore long-term care enrollment for MAPP members.
  - Current state and looking ahead – DHS plans to make significant improvements to the premium payment process for members, which require changes to CARES and ACCESS.
  - Until the end of 2025, when these system changes will be in place, we will not disenroll MAPP members for non-payment of premiums.
    - We will continue to charge MAPP premiums

- Members are expected to pay premiums each month
- There will not be a penalty for unpaid premiums once disenrollments resume
- Members can be disenrolled for reasons not related to premium payment

○ MAPP enrollment data (as of November 2024)

Population	Number of Members
Enrolled in MAPP (total)	32,275
Enrolled in MAPP and owe a premium	25,618
Members that paid premium by 10 <sup>th</sup> of month	15,142 (59%)
Members that paid premium by end of month	22,584 (88%)

○ Planned October 2025 System Changes

- Implementation of a “grace month” for premium payment; coverage will not end until after the month the premium is due.
  - Example: Maria owes a premium for January, with a due date of January 10. She does not pay her premium. She will maintain coverage until February 28.
  - DHS will notify MCOs and ICAs when a member enrolled in long-term care has not paid their premium.
- Streamlining initial and ongoing premium payment methods
  - MAPP members will no longer pay initial premiums to the income maintenance agency.
  - This means that members can use all methods to make their initial MAPP premium payment, including online through ACCESS.
- Enabling recurring online payments
  - Members will be able to set up recurring monthly payments online.
  - We will have mechanisms in place to adjust if there are changes in their premium amount.
- Preventing duplicative payments
  - We will make updates to ACCESS and our financial system so that members who are currently enrolled in Electronic Funds Transfer (EFT) cannot pay their premium for that month another way.
  - Members can change their payment from EFT to another method when they need to.
  - We will also ensure that premium statements and ACCESS reflect the actual balance due when a member pays more than they needed to.

○ Other Planned Changes

- Many more MAPP members must pay premiums now that the 2017-2019 budget changes are in place. This volume led to delays in check processing.
  - DHS’ fiscal agent has established a “lockbox” for MAPP premiums that results in most checks being processed within 2 days of receipt.
- Some members do not include the tear-off portion of their premium statement when paying by check, which can lead to delays in processing.
  - Starting in February, DHS is changing the premium statement and including a window envelope to be used in combination with the tear-off portion of the premium statement.

● Algorithm Functional Screen Model

- Participants in IRIS receive an individual budget allocation (IBA), a monthly amount estimated to cover their needs as measured by the Long-Term Care Functional Screen (LTCFS).
- The IBA is calculated from a mathematical model that is based on actual cost data and designed to cover at least 80 percent of costs for 90 percent of participants.
- DHS does not release the specific amounts in the IBA model, to ensure that functional screen results remain unbiased.
- The IBA model was updated in 2023 to better align screen results and cost data. The update is more accurate than the previous model—it does not over- or under-estimate costs as often and as much as the previous version did. Actual spending data from 2024 confirms the updated model is functioning as designed.

- IRIS participants were notified in late 2022 about the update. They were also told that if the 2023 IBA calculation was lower than what they had in 2022, they could use the higher 2022 amount for one additional year.
- Since the 2023 update, DHS has been making minor annual trend updates to maintain the IBA model. These do not affect the estimation from the functional screen itself, only the very end of the IBA calculation. No IBA can decrease because of a trend update.
- A participant's calculated IBA is based on the results of their annual functional screen. Their screen results can change from year to year, even if the participant does not feel like their needs have changed.
- Since the 2023 update, DHS has reviewed many cases where participant IBAs decreased from 2022. In nearly all of these cases, either the participant's functional screen changed, or the old IBA had significantly overestimated their costs. When individual cases are referred to DHS, we will continue to review them against those participants' functional screen results.
- There has been an increase in IRIS budget amendment (BA) requests over the past year. Partly this is because of providers asking for rate increases, but also because IRIS Consultant Agencies (ICAs) will start being held financially responsible in 2025 if they have authorized participants to spend more than their budgets allow.
- 2026 Include Respect I Self-direct (IRIS) Waiver Renewal Update
  - As part of the IRIS waiver renewal process, we conducted a comprehensive outreach and feedback initiative to gather insights and suggestions from various partners. Here's an overview of our efforts and the progress made thus far:
    - Survey Distribution: A survey was made available from July 9th to August 2nd, reaching participants, family members, caregivers, providers, advocates, ICA and FEA partners and others. This was done at the discretion of the department and was not required by the waiver.
    - Targeted Outreach: Targeted outreach efforts included engagement with the IRIS Advisory Committee during the July 2024 meeting, as well as two public input sessions held on July 30th and July 31st.
    - Feedback Received: Responses were collected from participants, family members, caregivers, IRIS contract staff and Advocates. Key themes identified include:
      - Services: Improving access to necessary services and empowering individuals to live more independently with equitable support.
      - Transportation: Addressing transportation barriers to enhance access to community supports.
      - Cultural Competency: Ensuring care is tailored to the diverse needs of participants through culturally competent resources.
      - Integrity: Strengthening program integrity to ensure resources are used effectively to achieve long-term care outcome.
      - Self-Direction: Empowering participants to make independent discussion about services that best meet their needs and preferences.
  - This feedback is being utilized in the waiver renewal process. Issues identified outside the scope of the waiver renewal have been referred to appropriate DHS teams for further research and follow-up.
  - Next Steps in the Process: We are currently in phase two, which involves internal review and approval of draft language. Upcoming milestones include:
    - Public and Tribal Comment Period: May 9, 2025, to June 8, 2025
    - Joint Finance Committee Submission: July 11, 2025
    - CMS Submission and Review: September 30, 2025.
  - We have switched the previous order of JFC submission and then public comment at the urging of advocates.
- Payment Integrity Review (PIR)
  - The Payment Integrity Review (PIR) program for personal care agencies was suspended in September.
  - Our Office of the Inspector General (OIG), in response to feedback from personal care agencies, is working on updating materials and making system changes.
  - OIG is targeting a relaunch in spring 2025.

- They will send a ForwardHealth communication letting providers know about the launch. To subscribe to our ForwardHealth Partners email list use this link:  
([https://public.govdelivery.com/accounts/WIDHS/subscriber/new?topic\\_id=WIDHS\\_09](https://public.govdelivery.com/accounts/WIDHS/subscriber/new?topic_id=WIDHS_09))
- OIG will also send provider-specific notice letters with 2 weeks-notice before their claims are reviewed through PIR.
- American Rescue Plan Act (ARPA) Grants Summit Webpage
  - Link to websites:
    - <https://www.dhs.wisconsin.gov/arpa/hcbs-grants-summit.htm>
    - <https://www.dhs.wisconsin.gov/arpa/hcbs-grants-summit-videos.htm>
  - How do we expand it and keep it going?
- **Council Feedback**
  - None

### **Current State and Opportunities for Improvement in Assisted Living – Alfred Johnson, Ken Brotheridge**

- Will speak to the current state and opportunities for assisted living
- Serve as the state survey agency; inspections, complaints, licensing, etc.
- Gave an overview of the Bureau of Assisted Living
- Working on creating a new e-Licensure Portal; biggest impact for behavioral health providers; will continue to share progress on this
- The next Assisted Living Forum will be on February 11, 2025; meetings are recorded
- Promoting quality; rolled out a customer service initiative; created an advisory group; enhance customer service in assisted living; held two customer service workshops
- Facility and Residence Process – piloting effort; receiving feedback from providers
- WCCEAL – Wisconsin Coalition for Collaborative Excellence in Assisted Living; great program;  
<https://qid.wisc.edu/wcceal/index.php>
- Regulatory efforts – administrative rule updates; for 3-4 bedroom homes; website available –  
<https://www.dhs.wisconsin.gov/rules/active-rulemaking-projects.htm> - Please see DHS 88 section.
- Enhance quality improvement within the bureau and externally
- Open invitation to reach out to Ken at ([Kenneth.brotheridge@dhs.wisconsin.gov](mailto:Kenneth.brotheridge@dhs.wisconsin.gov)) with ideas and opportunities and include the why.
- Create lasting systems and structures to improve quality of care
- Assisted Living: Survey Guide: <https://www.dhs.wisconsin.gov/regulations/assisted-living/survey.htm>
- **Council Feedback**
  - Jason G. – Rule going to influence some of the changes to Chapter 88?
    - Alfred – when you look at HCBS rules rolled out in 2014; WI is unique the regulations and rules are very similar; there are crosswalks available on the webpage
  - Mike P. – Be mindful when we update regulations; could be additional costs to providers; making sure family care program and Medicaid goes along with any regulation
  - In practice we are finding many providers who are not familiar with the rule and are not willing to participate with IDT staff on creating Modification of Rights when required.
    - Alfred - If this is a state license or certified providers – every provider that accepts Medicaid waiver funding shall comply to the requirements; if providers are struggling, reach out to Bureau of Assisted Living to help
  - Jason G. – Private equity and healthcare; can we identify who is the ultimate owner of these facilities?
    - Alfred – required to collect building and operation information; percentage of that is posted on website; under each facility directory you can see ownership information; could also request through open records; do collect sizeable information
  - Beth S. – Can you please provide the data on incident reports, investigations, resolutions and trending from last year?
    - Alfred – all within the state assisted living report; will share

- Jessica T. – Data available of out of state owners?
  - Alfred – would need to run analysis; this will be an individual report

### **Review Goals/Charges for LTCAC – Jason Glozier, Jill Jacklitz, Carrie Molke**

- Presentation shared with council
- Nice to review and a great way to start the year
- Spent 2024 really digging into processes and charges
- Went from 6-hour meetings to 3-hour meetings as a request from our self-advocates
- Proposed changes to charges and this will still need to be approved by the Secretary
  - From 4 charges to 3 charges that are all grounded in equity
  - 3 charges include:
    - Long-path
    - Medicaid Long-term Care
    - Workforce
- Charge #1: Long-Path – term came from Ted Talk; council spent time reviewing and utilizing concepts within long path; setting the stage for the future; how do we make this more concrete? Push states to develop a ten-year multi-sectoral plan on aging and disability (MPA-D). Provide input into the process to develop this ten-year plan. There was an ad-hoc committee to look at this charge.
  - Need an overarching long path statement and have more specific reachable goals beneath it
  - How do we make this goal feel reachable?
- Charge #2: Medicaid Long-term Care – provide recommendations regarding ways to strengthen Wisconsin's Medicaid long-term care programs; once we settle on the broader charges, we can list out specific items we want to tackle
  - Mainly about a values system
  - Suggest ending the charge at “leads the nation”.
  - What words do you take out? How do you shorten this?
  - Suggest changing the goal into plain language; ask our communications team to review
- Charge #3: Workforce – develop recommendations to support and strengthen the direct care workforce
  - Added the cultural and linguistic needs
- Next Steps – Secretary approval is needed for new charges to take effect; the council will be working more explicitly on the charges in 2025 council meetings and ad-hoc workgroups.
- We already have a Long Path Workgroup. Does anyone want to join the other 2 charges as a workgroup?
- Email Joyce Vue on which workgroup you'd like to join.
  - Either Medicaid Long-Term Care or Workforce
- Might be able to dive in with the full group.
- Hopefully have recommendations to the March meeting.
- **Council Feedback**
  - LaVerne J. – Regarding Long Path charge, 10 years is too little for Long Path charge; need to look at a longer process; use more plain language in updated charge; not a lot of strength in the charge
  - Shanna J. – Changes are good; makes it more real; this is an aspirational charge
  - Mike P. – Cost effective always throws me off; our goal should be to have Medicaid/Family Care reimbursement reflect the actual cost of care to provide services to individuals
  - Stacy E. – The lived experience piece is huge
  - Lisa D. – Suggest using fully funded; high-quality care available in the setting of their choice?
  - Shanna J. – Clarity, simplicity and transparency
  - LaVerne J. – Setting of their choice – may have a broader interpretation than what we would see; think about legislators and how they would think about
  - Jessica T. – Needs more than leads a nation; what does this mean to them when families read this?
  - Tina A. – Thinking of when this is translated; would the ideas be translated?
  - Don W. – Very long charge; what is it that the group is going to do? Recommend making it shorter
  - John S. – can you explain linguistic needs? For others speaking different languages.

- Don W. – We really want to grow the number of workforce, correct? Strength in communication and preparing? Add growth somewhere in this?
- Kevin C. – Both increase and improve competencies?
- Linda B. – Broaden, support and strengthen?
- Jessica T. – Suggest using communication needs instead of linguistic needs?
- Beth S. – change to simpler more direct language
- Jennifer J. - I've always felt cultural needs inherently includes language needs if we are looking to simplify

## **Charge 2 – Medicaid Long Term Care: Competitive Integrated Employment (CIE) – Alicia Boehme**

- Presentation shared with council
- Work that offers comparable pay for people to advance for individuals with disability
- Share some data
- Ages 18 to 64 years old
- Increase over the median wages in all programs from FY2021 to FY2023
- Resources available; new website: <https://www.dhs.wisconsin.gov/employment-skills/>
- Working on aligning reports to come out year by year; having a better look at results over time
- **Council Feedback**
  - Don W. – Why the discrepancy in numbers from employment and even wages?
    - Focus in family care with the pay for performance; might have some influence in numbers
    - From case management perspective
  - Chris W. – CIE numbers seem really low; why? Do you see we will make a big jump from 2023 to 2024; such a backlog of DDR in WI; so many things coming at this process; pushing the partners through business plan; children's system – getting kids from 14-16 and willing to do job shadowing; is there any thought of having a standard report? ICA's do a quarterly report; is this the same?
    - Believe the trend is upward but Alicia can come back and share; we do partner with DDR
    - Data is pulled from a lot of different sources; very comprehensive
    - Re-vamping reports; still in the process now
  - Beth S. – What can be done? Let's get to work program; when care teams and IRIS teams sat down with young adults, where do you want to work rather than do you want to work? Focus on those conversations and expectations; tying a transportation goal; help to increase numbers; over 60% of people are getting jobs on their own; how the department can tie some of the pay for performance in community connectiveness to CIE;
  - Sara M. – how are we taking into account the older generation?
    - Alicia – look at percents over time; have not taken into account if the cohort is losing folks due to those aging out of the cohort
    - Able to break down from 18-25 years, etc. smaller groups? Yes

## **Council Business – Jason Glozier**

- Any agenda items to include for March LTCAC?
- We will continue to work on charges
- **Council Feedback**
  - Mike P. – DHS proposal for budget; Government's budget should be out before our next meeting
    - We could ask Andrew Forsaith to come to our March meeting
  - Jessica T. – concerned about what might affect Medicaid funding; recommend something to the Secretary? Write a letter to the federal decision-makers that effects the Medicaid funding?
    - Should we write a letter for Medicaid expansion? Carrie will take this back; traditionally we have not been a body to do this

- Beth S. – A previous request for standards in the reports from Kim S.; has all standards been met?
  - Nicole will look into this.
- LaVerne J. – Evaluation and report on projects; have it available verbally or send copy of report to council members.
  - Kevin says it'll be updated on the website but can also sent out to everybody.
- Elsa D. – Is there a reason why we don't record these meetings?
  - Nicole will look into this.

### Public Comment – Jason Glozier

- Rick W.
  - Inclusa; read a note from executive director
  - Member-centered plan meeting; due to member living in adult family home; duplication of services; Inclusa wide push to reduce costs; policy will be a tremendous change; this will be disaster to group homes; disaster for clients more isolation; ask the council to request DHS to address this issue
- Deb F.
  - Able to speak to a DHS staff; very helpful; advised to contact Disability Rights; suggest LTCAC receive information from Disability Rights to see what individuals are having issues with; would be helpful for themes/threads that are happening; my choice family care stopped accepting applications for new or existing providers; Denying certain people; Is it possible to receive a copy of a functional screen? Alicia will get back to her.
- Denise W.
  - Parent; Inclusa wanting to cut services for son; it's been 4 years after; they will be impacted tremendously; son's life being disrupted; taking taxi service away; family is new to Wisconsin
- Tom P.
  - Guardian of sister in Reedsburg; has a strong work ethic; routine of going to work gives her purpose; paycheck puts value to her daily activities; finding community employment has been hard; Inclusa CRC told them to reduce from 5 days to 4 days; another reduction from 3-6 months; filed an appeal with Inclusa
- Jeanine N.
  - IRIS budgets have been cut; why is this happening? Need to submit a question to Joyce Vue at [joyce.vue@dhs.wisconsin.gov](mailto:joyce.vue@dhs.wisconsin.gov) for more information.
- Jennifer H.
  - Functional Screen; son with CP; lost hours; budget was decreased; depends on the algorithm? Need to submit questions to Joyce Vue at [joyce.vue@dhs.wisconsin.gov](mailto:joyce.vue@dhs.wisconsin.gov).

### Adjourn

Motion to adjourn by Elsa Diaz Bautista; seconded by Chris witt

Meeting adjourned at 12:32 pm

Prepared by: Joyce Vue on 1/14/2025.

These minutes are in draft form. They will be presented for approval by the governmental body on: 3/11/2025