

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: IRIS Advisory Committee			Attending:
Date: 7/24/2018	Time Started: 9:00 AM	Time Ended: 3:00 PM	Committee Members: Monica Bear, Julie Burish, Martha Chambers, Fil Clissa, John Donnelly, Mitch Hagopian,
			DHS Staff: Amy Chartier, Curtis Cunningham, Betsy Genz, Sheldon Kroning, Chris Sell, Suzanne Ziehr, Brie Arico, Kristen Bird, Amy Daniels, Danny Fossati, John Galetka, Jordan Humpal, Katie Kelnhofer, Kyle Novak, Shaun Swenson, Maurine Streckland, Cathy Klima
			Others: Dani San..., Heidi Davis, Kathie Miller, Alexa Butzbaugh, V. Gunderson, Carrie Candorella, Karrie Knapp, John O'Keefe, Zoe Kujawa, Sarah Oneil, Sue R, Shanna Jensen, Anne Karch, Molly Brandt, Wendy Kaplan, Lea Kitz
Location: Lussier Center, LePine Room, 3101 Lake Farm Road, Madison, WI 53711			Presiding Officer: Betsy Genz, Associate Director, Bureau of Adult Long Term Care Services

Minutes

Meeting Call to Order

Betsy Genz, Deputy Director, Bureau of Adult Programs & Policy (BAPP), DHS

- Introductions of those present and on the phone
- New committee member, Julie Burish, was introduced
- Minutes reviewed, ombudsman letter will be sent to committee members for them to send feedback.
- Martha Chambers approve and Julie Burish seconded.

Quality Priorities

Curtis Cunningham, Associate Administrator, Long Term Care Benefits & Programs, DHS

Presentation on Division of Medicaid Services Long Term Care Quality Strategy

- 6 Goals:
- Promote efficient and cost effective services and supports through innovation, standards, data-driven quality, and evidence-based practices.
- Focus on the whole person including their physical, psycho-social, and spiritual needs to live and work freely in their home and community.
- Empower people with access to an array of services and supports.
- Ensure continuous improvement of high-quality programs to achieve people's identified goals and outcomes.
- Engage people to have meaningful choices about where and with whom they live, their services, and who provides them.
- Empower consumers to make informed choices.

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- Task for committee is to determine what should be measured for IRIS under each goal.
 - DMS may do a lean exercise on how long it takes to get a participant from referral to enrolled and then going in program
 - ICA charts are being updated, adding enrollment time
 - **Committee Suggestions:** *on what should be measured in IRIS (not related to specific goals)*
 - Not make it more difficult for person on IRIS to access services,
 - DHS should be trained on Person Centered Planning
 - More assistance with setting goals and helping with transition goals. Specifically, IEP transition to IRIS – needs to be smoother
 - Frequency of IRIS consultants meeting with schools for the kids transitioning
 - IEP goals should transfer with IRIS goals
 - Need more involvement between 18 & 21 years
 - Does IC meet with participant during transition planning
 - Are resources aligned to make this a priority
 - Is this reflected in goals and spending
 - Have a hierarchy of how things are paid and how funds are approved
 - Metric showing continuity of employment
 - Has a participant requested a service that has been denied by the IRIS program, and how many
 - Ask participants why they don't want to or are not working
 - Quantity of people living in their own home after living in family home
 - Lack of access to providers
 - Appeal Data
 - Why participants change from wanting to work during the Functional Screen to not when they meet with the ICA
 - How long it takes a participant to get a work position
 - Length of transition from Children to Adult programs
 - Has the consultant agency struck a balance between supporting participant and not getting in their way
 - Have metrics connected to survey questions
 - Speed of getting in program
 - Social isolation

Department Updates

Betsy Genz, Deputy Director, BAPP, DHS

Amy Chartier, IRIS Section Chief, BAPP, DHS

- Provided updates on
 - Staffing efforts
 - Electronic Visit Verification Project
 - Home and Community Based Setting Project
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Participant Education Manual

Katie Kelnhofer, Contract Specialist, BAPP, DHS

Amy Chartier, IRIS Section Chief, BAPP, DHS

The manual will be sent to the committee members for review, prior to distribution

Walked through current version and responded to committee suggestions from May meeting

- The title of the document is going to remain as the “IRIS Participant Education Manual.”
 - The signature page is referred to as the “Acknowledgement” form, but these documents are intended for participant education. The introduction will indicate that this manual is designed to teach and tell participants of their responsibilities.
 - An introduction at the start of the manual will be added to indicate the goal and purpose of the manual.
 - “Name” and “Phone Number” will be added on the contact list text box to ensure that the participant has the name and phone number for their ICA, IC, and FEA.
 - The philosophy of self-direction and an overview of ICA- and FEA-specific responsibilities are found the IRIS Participant Handbook. The handbook will be referenced in the manual introduction.
 - The ICS (IRIS Consultant Supervisor) acronym will be removed, as it is infrequently utilized. The following acronyms will be included:
 - ADRC: Aging and Disability Resource Center
 - BUP: Back-Up Plan
 - APS: Adult Protective Services
 - EVV: Electronic Visit Verification
 - A review of the current chapters was completed and the following changes will be made:
 - The Background Check Education Form (currently missing) will be added.
 - The Budget Monitoring Education Form (currently missing) will be added.
 - The Fraud Prevention Education Form (currently missing) will be added.
 - The chapters will be re-organized.
 - E-signature or other method will not be allowed. A signature or mark indicating completion of participant education document(s) is required by the Centers for Medicare and Medicaid (CMS) and is confirmed through our Record Review process.
 - CMS requires that participant’s receive annual education/reeducation on these topics from/with their IRIS consultant.
 - The Acknowledgement Signature Form requires participants to sign and date when they completed each chapter.
 - Once published, both the Participant Education Manual and the Acknowledgement Form will be available on the IRIS Website. The Participant Education Manual, upon completion, will also be translated into Hmong, Russian, Spanish, and Arabic.
 - ICs are not required to review the Handbook with participants, as this is a reference, but they are required to go over the education documents with participants.
 - The target reading level for Medicaid publications is 6th grade. When you take down the reading level, the length of the document will increase, as it takes more words to explain the word you are replacing.
 - Participants will be expected to keep the manual and refer back to it. This will also be stated on the Acknowledgement form and in the
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Introduction chapter.

- Participants will be expected to sign the acknowledgement form after completing a review of each chapter with their IC.
- Introduction paragraphs will change to purpose statements on the nature of that chapter and why it is important for the participant.
- IRIS participants are afforded all of the same rights that any other Medicaid recipient is granted. A section on participant's rights will be added to the Manual.
- All chapters in this manual must be reviewed with participants upon enrollment and again annually. None of the forms are optional to review or complete, as they are all either a program or CMS-requirement to review with participants. The Budget Amendment Education Form and the One-Time Expense Education Form are optional, and as such are not included in the manual. The Restrictive Measures form was previously not a required form to review, but health and safety considerations have moved the program to ensure that all participants are educated on what Restrictive Measures are and are not.
- In the Self-Direction Tasks section statements regarding FEA selection responsibilities and that the participant will let providers/workers know they are unable to bill when in a hospital, institution, etc. The section will also be renamed "Self-Direction Responsibilities"
- In the Complaints/Grievances section, it will be added "DHS, provider, and SDPC" as entities that participants can issue complaints or grievances to.
- In the NOA/Appeals section, a statement will be added that the ICA represents the Department at hearings and that the participant can request records from their ICA, FEA, or the Department to prepare for an appeal hearing.

WISITS Update

Chris Sell, WISITS System Administrator, BAPP, DHS

- Mission / Goal of centralized case management system (WISITS)
 - #1 cost effectiveness and yield long term sustainability
 - Improve cost effectiveness of the contractors operations through system automation leading to a more cost effective program which will make the program more sustainable from a cost perspective
 - Building up the IT Infrastructure should limit the amount of additional program resources. Allows IRIS to function with limited staff
 - #2 increased program integrity
 - Add Automation and validation – system protections to ensure program integrity
 - Quality improvement – use WISITS to build infrastructure to assess quality and WISITS data to drive quality improvement
 - #3 better participant experience
 - Data collection – collect reliable data to drive
 - Quality Improvement
 - Participants don't have to retell their story
 - Transparency – participant access to data (i.e. participant portal – E-signatures) (future)
 - Health and Safety - Security of information within the system

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- General Updates
 - 1 year on ETK platform (8/28/17)
 - Now have 1000 users from 6 ICAs, 4 FEAs, 1 SDPC, Department of Justice, Department of Human Services, Office of the Inspector General, MetaStar, and WPS Call Center
 - Able to successfully migrate info from program inception. For example, Case Notes back to program inception 2008
 - Will focus on system enhancements in upcoming years

Public Comment

Amy Chartier, IRIS Section Chief, BAPP, DHS

Anne Karsch - Parent of 32 year old participant

- Adult education, learning circle monthly
- FEA Challenges – getting payment to providers
 - Matching up of ISSP & FEA
 - Interface between WISITS & FEA
 - WISITS Showing hours / month and the FEA show's quarters of hours/year
 - Recommend quarter hours/year for both
 - LTC Functional Screen is calculated by month, this should be calculated by year
- Would like to have hours per caregiver more flexible so to cover when one is out
- Budget reports are hard to read
 - 6-8 week lag on budget reports, need more real time information
- Recommend leading a conference of learning to facilitate dialog between FEAs and providers

Wendy Kaplan

- Important to measure success and failure
- Big improvement with IAC operations
- Great to see sharing around the table
- Public would like to know why something isn't being done
- For the public, all information should be shared in understandable language, but public should have access to policy and know where to find it. Should also be able to have hard copy of documents discussed

IRIS 10 Year Celebration

Betsy Genz, Deputy Director, BAPP, DHS

- Committee members and DHS staff discussed how they have seen the program change and grow over the last 10 years
 - Video of IRIS participant shown: <https://m.youtube.com/watch?v=DDfdaMHLlns>
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National Core Indicators Survey Results

Angela Witt, Integrated Data & Analytics Section Chief, BLTCF, DHS

- Results of the 2016-17 National Core Indicators (NCI) Survey were presented.
- Complete results can be found on the NCI website: https://www.nationalcoreindicators.org/upload/core-indicators/WI_State_Report_2016--FINAL.pdf
- DHS will start to participate in the NCI Aging and PD survey (FE/PD) for 2017-2018.
- DHS is collecting data that looks at employment with the number of hours worked, outside of the NCI data
- **Committee Suggestions:**
 - Have more information on transportation, for example ask how participants get where they want to go
 - Have more information on employment, such as number of hours they are working
 - Maybe look at IRIS participant satisfaction in areas where the support broker could assist

Future Meeting Agenda Items

Betsy Genz, Deputy Director, BAPP, DHS

- Ombudsman letter (this will be sent out for feedback before next meeting)
- Send completed Participant Education manual to committee for review (this will be sent out for feedback before next meeting)
- Employment presentation
- PHW process – discuss timeline for having them start and way to improve it
- Committee Sub-workgroup – discuss definition of SDS
- Updated Charter

IRIS Advisory Committee Charter and Composition

Betsy Genz, Deputy Director, BAPP, DHS

- Must have providers as committee members, per waiver citation
 - Need to add minority representation to the committee demographics
 - The Medicaid Director has asked to have 1 representative from each contractor group (ICA, FEA, SDPC) on the committee
 - The contractor groups will determine who their representatives are
 - Can have some rotation, but consistency is still needed
 - Next step is to determine these representatives
 - The expert category will have a parent, non-related guardian and tribal representative
 - Question from committee about where the target groups will be included
 - DHS response – from the advocacy perspective, Maureen Ryan provides that.
 - Since much of committee focus is currently on employment and quality, committee members that are providers should be able to provide insight
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in these areas

- Julie Burish will send the contact info of a Milwaukee agency that has a broad base of expertise to Betsy Genz as a possibility
- ICAs will assist with identifying and recruiting possible minority member for committee
- For the Tribal representative, would like someone who is not involved too many other committees
- IAC meeting webpage will be developed, this will include membership, board, charter, application for membership, meeting dates, minutes and agenda
- The charter should align with what's in the IRIS waiver
 - Will send for feedback from committee
- Committee agreed that sending out agenda and minutes 5 days before next meeting is sufficient.
- Committee agreed that 30 minutes for public comment is sufficient
- Question from committee as to why there is not chair/co-chair for this committee
 - A few committee members were at a discussion about 18 months ago where it was decided to keep the IRIS Advisory Committee and eliminate the chair positions.
- Plan is to have Charter drafted before September meeting
 - Will plan to send out for committee to review before meeting
 - Charter may change as language changes in wavier
- Committee meeting timing will be discussed at September meeting
- **Committee Suggestions:**
 - Include a SHC provider; possibly have a provider that can represent both PC and SHC.
 - Have a participant's sibling in the expert category
 - Have a better ratio of participants to other committee members
 - Include representatives from both ombudsman programs

Prepared by: Suzanne Ziehr on 7/24/2018.

These minutes are in draft form. They will be presented for approval by the governmental body on: 9/24/2018