

# Wisconsin Long Term Care Advisory Council

Meeting of January 10, 2017

Sheraton Madison Hotel, Madison

## Meeting Minutes

**Members present:** Audrey Nelson, Beth Swedeen, Cindy Bentley, Dan Idzikowski, Heather Bruemmer, Jessica Nell, John Vander Meer, Lauri Malnory, Leslie Fijalkiewicz, Mary Frederickson, Maureen Ryan, Robert Kellerman, Sam Wilson, Roberto Escamilla II, Tim Garrity, Tom Hlavecek, Amy Goldman, and Bill MacLean.

**Members absent:** Beth Anderson, Carol Eschner, Denise Pommer, John Sauer, and Christine Witt.

**Others present:** Linda Seemeyer, Curtis Cunningham, Carrie Molke, JoAnna Richard, Betsy Genz, Dave Varana, Hannah Cruckson, Kevin Coughlin, Karen Kopetskie.

### Call to Order and Welcome

Heather Bruemmer called the meeting to order at 9:32 a.m. and welcomed members and guests. Council members and staff from the Department of Health Services (DHS) introduced themselves. The minutes from the November 2016 meeting were unanimously approved on a motion from Maureen Ryan, seconded by Roberto Escamilla II.

### Department Updates

Curtis Cunningham, Assistant Administrator, Division of Medicaid Services, Long Term Care Benefits and Programs, gave the following Department of Health Services updates.

Curtis Cunningham gave an update of several 2016 priorities

- **Autism Transition:** The transition of autism services from Children's Long Term Support (CLTS) Waiver to the Medicaid card. DHS is working with counties to make sure a prior authorization is in place. The transition has gone well.
- **CLTS Waiver application.** The CLTS Waiver application has been submitted to the Centers for Medicare and Medicaid Services (CMS). DHS will ask for an extension of the current waiver until the application is approved.
- **Waivers Service Rate Corrective Action Plan (CAP)** – With the help of a contractor, DHS continues modifying the existing rate-setting methodology for fee-for-service 1915(c) waiver services, including CLTS, in compliance with the CAP required by CMS. With the expansion of statewide expansion of Family Care, DHS hopes to exclude adult long-term care legacy waivers from this methodology.

- **Rock County expansion** – The expansion of Family Care and IRIS programs into Rock County, which occurred in June 2016, was successful.
- **Future expansion of Family Care and IRIS programs** – DHS continues to work toward expanding long-term care managed care and self-directed programs to Oneida, Vilas, Florence, Adams, Taylor, and Forest counties by early July of 2017. Dane County is expected to expand by the first quarter of 2018.
- **Institutes for Mental Disease (IMD) Rebalancing Initiative** – We are starting to get data from counties. Some counties have received reimbursement. We are looking at diagnoses instead of behaviors as a better predictor of admission.
- **Home and Community-Based Services Managed Care Rule** – DHS is working on a Statewide Transition Plan to implement the new Managed Care Rule. The Transition Plan will be released for public comment on March 1.
- **Quality Strategy** – We continue working on a robust Quality strategy. Our recent scan revealed 400 measures. We want to engage National Core Indicators so we know that we are providing good services.

Carrie Molke, Director of the Bureau of Aging and Disability Resources (BADR), of the Division of Public Health, gave the following updates:

- **Aging and Disability Resource Centers (ADRC) Reports** – BADR submitted the last of the required reports to the legislature on Dec. 20, 2016. The reports covered the areas of [The Integration of Income Maintenance \(IM\) and ADRCs](#), [ADRC Governing Boards](#), [Reliability and Consistency of ADRCs Functional Screening and Options Counseling](#). The bureau created a third-party survey that was used in the final report. The report found that the ADRCs are reliable and consistent.
- **Dementia Report** - The dementia report was submitted to the legislature to look at crisis beds and creating a proposal for what that could look like.
- **Changes in ADRC boundaries** – The first ADRC was created in 1998. ADRCs were available statewide by 2013. A number of them are looking at making changes to their boarders. In one instance, a four-county ADRC is looking to changing to a single county. The reason for the change is that some ADRCs are part of human services departments, others are part of aging offices, which creates a difference in philosophy. In addition to ADRCs, every county has an aging unit. Some are one in the same. This design is good for people, operations, and the bottom line.
- **Aging and Disability Professionals Association of Wisconsin (ADPAW)** – ADPAW presented a set of recommendations.
- **Caregiver Strategy**. Addressing the caregiver shortage continues to be a priority. Although a large focus is on paid caregivers, focus must also be placed on addressing the needs of our unpaid workforce.

- **Behavioral Health** – Honing in on the deaf and hard of hearing population because of communications access barriers. We are also engaging partners in this effort.
- **Adult Protective Services (APS)** – The APS national conference will be held in Wisconsin in the Fall. We’re involved in an effort to increase collaboration to improve services. APS guidelines are coming. These guidelines will include training and best practices. Crisis in APS doesn’t always work well locally.
- **Quality Management** – We are working with ADRCs, IM agencies and Independent Living Centers (ILCs).

Council members made the following observations and raised the following issues in their discussion:

- Q: Is there an aging component to the opioid abuse issue? Aging as been a missed perspective.
- A: Carrie Molke: Since moving to the Division of Public Health, BADR has been involved in [Wisconsin Health Improvement Planning Process \(WIHIPP\)](#). Opioid is one of five priorities being addressed. The others are alcohol, suicide, tobacco, and physical education.
  - There is high use of opioids in the aging population. Older adults are five times more likely to use and abuse opioids.
  - DHS is forming groups around these priorities. We are looking for partners who are interested in working on these priorities. (Anyone interested in getting involved should email [DHSW2020@wisconsin.gov](mailto:DHSW2020@wisconsin.gov).)
- Q: What ages are represented in this trend?
- A: Carrie Molke: It varies. Some data looks at 60+ and some 65+. Not sure about the opioid study.
- Q: Are you looking at opioid abuse by location?
- A: Carrie Molke: People are coming to the realization that there is no stereotype. Opioid addiction is prevalent regardless of income, age, or location.
- Comment: Older adults are also acting as caregivers to family members who are struggling with addiction.

### **Keeping People Safe and Healthy in the Community**

Carrie Molke presented information regarding this council charge, including current demographics about the aging population and the population of people with developmental disabilities, Issues that create risks to health and safety, current programs designed to address health and safety of individuals in need of long-term care services.

Carrie concluded her presentation by posing the following questions to council members:

- What additional prevention strategies should be developed to delay the need for long-term care?
  - How do we reduce the issues that create risk?

- What other gaps are there?
- What are potential solutions/strategies for addressing the risks and gaps?
- What additional strategies are needed to prevent people from entering residential settings before necessary?
  - What settings are most appropriate for what acuity needs?

**Secretary Linda Seemeyer introduced new members of the council:**

- Leslie Fijalkiewicz – of the ADRC of Barron, Rusk and Washburn Counties
- Tim Garrity – Chief Innovation Officer of Community Link
- Amie Goldman – President of TMG by Magellan Health. TMG by Magellan Health currently provides IRIS consultant agency services to IRIS participants.
- Bill MacLean – Associate Director of the University Center for Excellence in Developmental Disabilities (UCEDD) at the UW Waisman Center.

**Comments from the Public**

Lisa Pugh introduced herself as the new appointed state director of The Arc Wisconsin.

**Final Workforce Summary and Quality Summary**

Curtis Cunningham informed council members that:

- Feedback regarding the draft Quality Summary that was handed out at the meeting is due to Hannah Cruckson by January 31.
- The final Workforce Summary will be presented to DHS Secretary Linda Seemeyer in February.
- Going forward, Long Term Care Advisory Council charges will be issued every calendar year, instead of every state fiscal year.

**Communications Discussion Groups**

Council members broke into two groups to discuss the following Communications questions:

*Long Term Care Advisory Council Charge for Communications*

Develop plans to communicate to all long-term care stakeholders. Responsibilities will include:

- Ensuring consistent messaging to all entities in the long-term care system.
- Ensuring that policies are being accurately communicated to consumers.
- Ensuring the Department of Health Services is receiving accurate consumer feedback.

Ensuring consistent messaging to all entities in the long-term care system.	
1. How do we coordinate messages and collect feedback from the various councils, committees, and boards?	
2. What are ways to communicate effectively, efficiently, and broadly to an audience that may not have access to communication tools or an understanding of complex policy?	
3. How do we address resistance when policy is issued?	
Ensuring that policies are being accurately communicated to consumers.	
4. What is the communication strategy for policy development?	
5. At what level should each group engage in the process?	
Ensuring the Department of Health Services is receiving accurate consumer feedback.	
6. What is the role of long-term care boards, committees, and councils in achieving effective communications in relation to funneling consumer feedback?	

DHS will draft a summary of comments regarding the communications questions and present it at the March 14, 2017, meeting.

**Adjournment**

The meeting adjourned at 2:55 p.m., motioned by Robert Kellerman and seconded by Mary Frederickson.

**Handouts**

- *Draft minutes from the November 8, 2016 meeting*
- *PowerPoint Presentation – Keeping People Safe and Healthy in the Community*

- *Long-Term Care Workforce Development Summary*
- *Long-Term Care Quality Scorecard Discussion Summary*
- *Long Term Care Advisory Council Communication Charge questions*
- *Long Term Care Advisory Council Structure*
- *Division of Medicaid Services Plan Overview*