

Wisconsin Long Term Care Advisory Council
Meeting of May 8, 2012
Wisconsin Department of Revenue Building, Madison, WI

Approved Minutes

Members present: Beth Anderson, Heather Bruemmer, Teri Buros, Devon Christianson, Dana Cyra, Hugh Danforth, Carol Eschner, Caroline Feller, Robert Kellerman, Geri Lyday, Tom Masseur, Todd Romenesko, Maureen Ryan, David Scribbins, Stephanie Sue Stein, Beth Swedeen, Judith Troestler, Kate Wichman, John Sauer, Christine Witt

Members absent: Karen Avery, Tom Hlavacek, Lauri Malnory, Barb Peterson, Mary Peterson

Others present: Monica Allen, Michael Blumenfeld, Pris Boroniec, Deanna Clingan-Fischer, Grant Cummings, Wendy Fearnside, Eric Hanson, Bill Jensen, Shanna Jensen, Lea Kitz, Margaret Kristan, Tom Lawless, Vince Maro, Donna McDowell, Forbes McIntosh, Carrie Molke, Charlie Morgan, Ann Marie Ott, Mary Panzer, Gail Propsom, Deb Rathermel, Kathy Rogers, Tim Stumm, Janice Smith, Carla Washington, Beth Wroblewski, Ramie Zelenkova

Heather Bruemmer called the meeting to order at 9:30 a.m. and introduced Tom Masseur, Executive Director of Disability Rights Wisconsin, who was attending for the first time and Council members introduced themselves.

Approval of Minutes

The minutes of the March 13, 2012 meeting were unanimously approved on a motion by Carol Eschner, seconded by Christine Witt.

Virtual PACE

Deb Rathermel and Tom Lawless provided an update on the Virtual PACE proposal that the Department submitted to CMS on April 26, after reviewing and incorporating ideas from the comments received. Virtual PACE will focus on long term nursing home residents who are dually eligible for Medicare and Medicaid and participate in the fee-for-service program, and will be offered in selected areas of the state. Public comments on the initial proposal led to several changes, including refining the eligible population to focus on long term nursing home residents and implementation beginning in locations where there are willing ICO and nursing home partners. Statewide implementation will be phased in over a three year period. The Department's proposal for a passive enrollment protocol with a six month retention period has not changed. The proposal can be viewed at <http://www.dhs.wisconsin.gov/wipartnership/pace/pdf/proposal042612.pdf> and is also posted on the CMS site.

A lot of work remains to be done. Next steps include:

- Defining more specifically how and where Virtual PACE will be implemented.

- Outreach to stakeholders to provide information, gather input and identify willing ICOs.
- Development of standards for the care model, provider networks, and beneficiary protection.
- Establish a MOU between the Department and CMS.

SSI Managed Care

Eric Hanson from the Division of Health Care Access and Accountability gave a presentation on SSI Managed Care and answered questions. There are seven SSI managed care plans serving 64 counties. An “all in/opt out” model is used in counties with more than one HMO and a voluntary model where people choose the HMO or FFS is used in counties with only one HMO. Services include all services in BadgerCare and, in addition, dental care, transportation, nursing home and targeted case management. Plans are evaluated and paid for performance. Council members asked whether consumer satisfaction information to allow comparison between plans is available. A report card for the program will be posted on line.

Long Term Care Annual Report

Monica Deignan and Gail Propsom reviewed data from the 2010 annual report on Family Care/PACE/Partnership and answered questions. Much of the discussion centered on employment issues. Members observed that employment numbers were fairly similar for Family Care and IRIS and asked if data for the young adult population could be analyzed to see if the emphasis on youth transitions is making a difference. Donna McDowell explained that DPI and DVR are the major players in employment for youth in transition, which makes the interagency agreement that DHS has with these agencies particularly important. The three agencies have a data agreement and DHS is using the last of its MIG grant to support data analysis. Several Council members indicated that they would like more information on employment in the future. Devon Christianson asked whether older adults have lost ground as a percent of those served. A copy of the report can be found at: <http://www.dhs.wisconsin.gov/lcicare/Reports/PDF/2010annualreport.pdf>.

ADRC Annual Report

Donna McDowell reviewed the ADRC Annual Report for 2011. All but four counties (Dane, Rock, Door and Florence) currently have ADRCs and Dane County has applied to open an ADRC in October. ADRCs provide an array of services in addition to being the entry point for publicly funded long term care programs. ADRC customer contacts have increased fivefold since ADRC and Family Care expansion began in 2007. ADRC customers are predominantly people over age 60 and their caregivers. More outreach is needed, especially for people with physical disabilities. A copy of the report can be found at http://www.dhs.wisconsin.gov/publications/PO/p00251_2011.pdf.

Cost Effectiveness in MCO Planning and Contracting

Pris Boroniec said that she will be asking the MCO Leadership Committee to share information with the Council about the issues MCO are facing, the Department’s

expectations, and how things are done by MCOs and their partners. The topic for today's meeting is how MCOs are dealing with the pressure to be cost effective.

Teri Buros told the story of the Southwest Family Care Alliance, which began in 2008 with only \$1 million of initial capital. By 2009, the MCO was in serious financial trouble. Without the ability to get a bank loan or generate tax revenues, the MCO had to work with what it had. They began by analyzing revenues and expenses, reviewing functional screens to see if any potential revenue was being missed, and looking for ways to reduce administrative, care management and LTC service costs. They moved to lower rent, froze salaries and renegotiated IT costs. They renegotiated the care management contracts with their counties and later brought the care management function in house. A major focus was renegotiating provider rates. At 87% of the MCO expenses, long term care services to members were by far the largest cost driver, with a substantial amount going to residential care. The cost of residential care for each individual enrollee was analyzed in comparison to the person's LTC functional screen, and outliers with the highest rates relative to resident needs were identified. The MCO renegotiated rate reductions with the outlier facilities, in some cases by as much as 50%. A standard rate for supportive home care rates, which had ranged from \$14 - \$30/hour, was negotiated at \$16.50/hour. The process was difficult for participants, providers and staff, but was necessary for the MCO to survive. All solvency and risk requirements have now been met.

Council members asked how consumers responded to the changes. Teri said that there had been some resistance and some grievances but that most of the MCO decisions were upheld. Heather Bruemmer noted that the Ombudsman had received a number of calls and suggested the MCO leadership and Ombudsman communicate about issues early on to lessen fears and move forward. Devon Christianson asked about lessons learned and what advice the MCO would offer for new Family Care counties. Dana Cyra recommended creating a provider quality council, having brainstorming meetings with providers about cost effectiveness, and developing an acuity structure with provider input. Geri Lyday said that it is important to renegotiate provider contracts before rather than after the transition to Family Care. John Sauer cautioned that the LTC functional screen does not fully reflect needs relating to behavioral issues and complex, unpredictable medical conditions, which can affect the cost of providing care. Stephanie Stein expressed concern about what might be lost in Family Care because of the magnitude of savings expected. At what point will MCOs simply be managing payments and directing care plans around cost? How will we know when we have saved as much as we can? Pris Boroniec stated that sustainability is not intended to harm participants and that we need to build on the lessons learned.

Status Update on the Family Care Waiver

Pris Boroniec gave an update. The Waiver renewal was submitted to CMS in the fall of 2011 and the State is filing for a third extension. DHS has shared what was done to enroll people with immediate needs and to fill attrition slots while the caps were in place in response to CMS concerns. Feedback from CMS has been positive. Council members

asked if DHS could share its communications with CMS with the Council. Pris explained that the Department needs to give things time to go through channels in order to have a better chance for a successful dialogue.

Sustainability Initiatives

Updates were provided on the following three sustainability initiatives:

- ***Crisis Intervention and Stabilization Initiative.*** Vince Maro described the initiative to look at how MCOs can better serve people with mental illness and challenging behaviors to avoid admission to the mental health institutes, IMDs and psychiatric hospitals. The initiative will replicate a project that was piloted in 2010-11 to coordinate crisis response by the MCO and county mental health and adult protective services agencies. Geri Lyday indicated that this is a big issue for Milwaukee County. She indicated that there is a real need for specialized resources in the community to work with young adults who are transitioning from foster care to the adult system with intellectual disabilities, AODA issues, and experience with the criminal justice system. John Sauer asked if there would be a value to convening a group of ICFs-MR around the issue.
- ***Medication Adherence Initiative.*** Kathy Rogers provided an update on this initiative to provide in home medication dispensing devices as a way to avoid unnecessary hospital, emergency room, and nursing home admissions. DHS will certify vendors. MCOs will work with individuals to select the best device for them and contract with the vendor. Six vendors have indicated an interest and are under consideration. Council members asked whether the devices will also be available to non-Family Care members. The Department will start with Family Care and then work with ADRCs to develop an assessment tool and identify people who could benefit from the devices, and give them information.
- ***Living Well At Home.*** Donna McDowell described this initiative, which builds on a number of current efforts, including fall prevention and chronic disease self-management, Alzheimer's caregiver support, and options counseling. A cost calculator will be developed to help people understand and compare the cost of different home care, assisted living and nursing home alternatives and factor that into their decision-making. Todd Romenesko observed that the impacts of these initiatives could go well beyond Family Care.

Policy Initiatives Advisor

Pris Boroniec introduced Kevin Coughlin as the new Policy Initiatives Advisor in the Division of Long Term Care, replacing Susan Schroeder. Kevin has been the Director of the Bureau of Assisted Living for the last 10 years. He will be working on a variety of issues relating to best practices and quality in different care settings.

Council Business

Heather Bruemmer informed the Council that the Board on Aging and Long Term Care is now providing the Medicare Part D Helpline for people age 60 and older and will get a new 800 number for the program.

A Council subcommittee is being established to look at issues relating to transportation, including those identified at the March meeting. Dana Cyra identified an additional issue that has arisen because MCOs are limited to paying MA rates for transportation but LogistiCare is not. This has resulted in providers not wanting to work with the MCOs. Carol Eschner volunteered to chair the subcommittee and will be in touch with members.

Agenda Topics Requested for the July Meeting

The following topics were requested for the July 10 meeting:

- Employment
- Sustainability initiatives
- Family Care expansion plans
- Regional LTC Advisory Committees
- Fiscal reports
- MCO quality and pay for performance
- More examples of MCO success and how things work.

Handouts

- *SSI Managed Care Overview*, May 8, 2012
- *Virtual PACE Enrollee Outreach Timeline; June 2011 Count of Dual Eligible Nursing Home residents by DQA Region; and Virtual PACE eligible Population Recommendation*
- *2010 Annual Report: Long Term Care in Motion, Wisconsin's Long Term Care Programs*, March 15, 2012
- *2011 Status Report: Aging and Disability Resource Centers of Wisconsin*, January 2012
- *Wisconsin's Family Care Program – Lifting the Temporary Caps and Putting the Program on the Path to Long Term Sustainability*, April 17, 2012
- *LTC Sustainability Initiatives: Crisis Intervention and Stabilization Project Charter*, April 17, 2012
- *Medication Adherence Initiative Update for Wisconsin Long Term Care Advisory Council*, May 8, 2012

Meeting adjourned at 3:30 p.m.