

Family Partnership Care Management Coalition Planning Grant Final Report

Department of Health Services – Division of Disability and Elder Services

Reporting Period: This report documents activities performed by planning grantees for the entirety of the consortium’s grant period. This report includes information from May 2005 to July 2008.

Section 1 – Identifying Information

Planning Group Name: **Family Partnership Care Management Coalition (FPCMC)**

Name/Address/Contact Information for person completing this report:

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Current Planning Partners:

Planning Partners include the following counties: **Columbia, Dodge, Jefferson, Green Lake, Marquette, Ozaukee, Sauk, Sheboygan, Walworth, Washington, Waushara and Waukesha counties.**

Planning Partners include the following private agencies: **Care Wisconsin First, Inc., Community Care, Inc., Lutheran Social Services of Wisconsin and Upper Michigan.**

Planning Partners no longer involved in the process include:

The Management Group (TMG) decided to disengage from the planning when services were not purchased from them using the grant funds.

Juneau County and Richland County ended its affiliation with the planning group as it moved into active planning with the Southwest Family Care Alliance (Richland County).

Fond du Lac County did not actively plan with the consortium as it focused its efforts with the Northeast Wisconsin Consortium.

CLA ended its participation when it transitioned its Partnership membership to Care Wisconsin First.

Sauk County remains active but is formally planning for the implementation of Family Care through the Southwest Family Care Alliance (Richland County).

Section 2 – Strategic Planning for System Change

Describe your approach and your progress to strategically plan for managed long-term care program development and implementation.

The Coalition planned through the consensus of all partners at the table. Some of the work was done using workgroups who reported their progress at regular steering committees.

The Coalition was successful in its planning efforts as managed care is in the process of implementation across the region. A copy of the original MOU and subsequent amendments that structured the coalition proceedings is included in Section 2 Exhibits.

Detail any needs assessments, mission, principles, goals, objectives and workgroups that your planning group established.

FPCMC guiding principles

- a. The entity that signs the contract with the State will serve clients region-wide**
- b. The governance of the entity will be made up of all partners who wish to have a stake in the patient/client service process**
- c. Decisions that guide the entity will be done by a vote of partners; a partner's sphere of influence in the decision process will be proportioned to the financial stake that partner has in the region service structure.**
- d. The entity will be able to provide all program options if necessary (Family Care and Partnership)**
- e. Partners agree that the ADRC(s) will cover the region in whatever fashion or structure is most beneficial and most cost effective.**
- f. The Partnership Organizations will be the lead entities and will propose a service structure/design to the partners for approval.**

The goals and assumptions of the private agencies involved in the planning process are included in the Section 2 Exhibits.

Report the membership of steering or executive committees and workgroups (name and affiliation), meeting schedule (weekly, monthly, etc.). For steering or executive committees, describe the procedural and decision-making model used. For workgroups, describe the scope of work, tasks and outcomes from each.

➤ **Steering Committee:**

Mission: to explore, plan and implement managed long-term care (Family Care, Family Care Partnership and PACE) throughout the FPCMC region. The Steering Committee generally met twice a month.

Membership: see list in Section 2 Exhibits.

➤ **ADRC Workgroup:**

Mission: To explore, plan and implement county, multi-county or regional Aging and Disability Resource Centers. The Workgroup generally met monthly.

Membership:

**Sue Torum, Chair – Jefferson County
Mike Bloedorn – Washington County
Barb Wollner – Lutheran Social Services
Todd Costello – CLA
Kate Surprise – Waushara County**

**Tom Schleiwiler – Jefferson County
Elaine Reiss – Lutheran Social Services
Dennis Wittig – Columbia County
Linda Van Ness – Green Lake County
Carol Wright – Marquette County**

Joan Ketterman – Sheboygan County
Dave Titus – Dodge County
Linda Olson – Washington County
Antwayne Robertson – Waukesha County
Cathy Bellovary – Waukesha County
Suzi Giesen – Green Lake County
Dennis Lyons – Waukesha County

Wayne Hagenbuch – Elder Care
Frank Peterson – Ozaukee County
Jenny Kertscher – Washington County
John Schnabl - SEWAAA
Lori Muzetko – Walworth County
Kathy Ryan – Dodge County

➤ **Communication/Stakeholder Workgroup:**

Mission: To gather information from interested and involved stakeholders and create an effective system of communication regarding the long-term care reform effort in the region. The workgroup generally met monthly until implementation of long-term care began. At that time county-based communication systems were in effect.

Membership:

Joan Ketterman, Chair – Sheboygan County
Elaine Reis - Lutheran Social Services
Kristin Jefferies –Care Wisconsin
Todd Costello – Community Living Alliance
Phil Davis - TMG

David Sievert - CLA
Kathy Ryan – Dodge County
Mike Bloedorn – Washington County
Bob Haupt – Ozaukee County
Etty Wilberding – Walworth County

➤ **Executive/Governance Committee**

Mission: To provide overall leadership for the project and direction to the Project Manager and the facilitator/consultant. The Committee met as needed.

Bill Orth – Sauk County
Carol Wright – Marquette County
Todd Costello – CLA
Ken Eimers – Elder Care
Paul Soczynski – Community Care, Inc.

Dave Titus - Dodge County
Glenn Johnson – Waushara County
David Sievert – CLA
Ed Kohl – Lutheran Social Services

➤ **IT Workgroup:**

Mission: To assist planning partners in the development and use of effective information technology for ADRC and MCO application. The Workgroup met as needed.

Membership:

Cathy Karis, Columbia County
Ken Kamps, Dodge County
Bob Haupt, Ozaukee County
Lynn Horkan, Sauk County
Ann Christman, Waukesha County
Alice Halbrow, CLA
Ken Eimers, Care Wisconsin
Elaine Reis, LSS

Karen Pursley, Dodge County
LeRoy Dissing, Green Lake County
Ginger Ayers, Ozaukee County
Diane Shaw, Sauk County
Debbie Paavola, Waushara County
Scott Johnson, Community Care, Inc.
Rita Sievers, Care Wisconsin

➤ **Economic Support Workgroup:**

Mission: To support counties as they prepared for the economic support functions in a managed care environment. The workgroup generally met monthly.

Membership:

**Julie Arendesen – Dodge County
Joanne Faber – Washington County
Jill Johnson – Jefferson County
Ardis Loeber – Bethesda
Elizabeth Mahloch – Sheboygan County
Wendy Metcalf – Columbia County
Eileen Newby – Ozaukee County
Cheryl Selbach – Marquette County
Sandra Torgeson – Jefferson County
Diane Voth – Marquette County**

**Sheila Drays – Dodge County
Linda Hunt – Washington County
Shirley Kitchen – Dodge County
Deb Lyons – Green Lake County
Kathy McMullen – Sheboygan County
Lori Muzatko – Walworth County
Luann Page – Waukesha County
Pat Sharp – Walworth County
Maralyn Trayler – Waushara County**

Identify and describe the involvement of paid or unpaid facilitators that guided your process. If your planning group hired a project manager, list the responsibilities of that individual and the skills he or she brought to your planning efforts. Describe the extent to which your group utilized consultative services, such as those offered by Community Care in Action (Gerry Born), the University of Wisconsin Extension, The Management Group or Organizational Skills Associates (Buck Rhyme).

From March 2006 to November 2007, Paul F. Soczynski served as the uncompensated Project Manager. From December 2007 to July 2008, Paul Soczynski was compensated for project management out of grant funds. A job description for Paul as the Project Manager is provided in the Section 2 Exhibits.

Most of the work was done by in-kind contributions from Steering Committee members and staff from the partner agencies.

Consultation services were not provided by any of the aforementioned consultants. The FPCMC Communications Workgroup used the services of Creatonomy for some time as they organized communication and stakeholder activities.

Describe the level of involvement of local elected or appointed officials in your planning efforts. Identify the timing and frequency of their involvement; for example, were they involved from the beginning and on-going basis, or not engaged in the planning efforts, but briefed at strategic intervals. Describe the official action taken by local elected officials and boards in regard to your planning or implementation process. Attached all resolutions, by-laws or legal agreements reviewed and approved by these bodies.

Each county maintained communications with Long-Term Care Councils, Aging Commissions, Human Services Committees and County Boards. Steering Committee members worked with their respective decision makers as implementation plans were created and necessary approvals were required.

Copies of individual county resolutions are included in Section 2 Exhibits.

Describe any legal assistance obtained by your planning consortium and identify the firm and attorney who provided these services.

Early in the process we did consult with legal counsel from the Wisconsin County Association. Craig Thompson and Attorney Andy Phillips offered assistance as the coalition evaluated the merits of Family Care District and/or 6603.01. The Coalition eventually moved into a different structure.

Section 3 – Consumer and Stakeholder Participation

Describe your approach to consumer and stakeholder participation in your planning (including involvement with UW-Extension LTC Planning and Stakeholder Project). Identify dates, content and summarize outcomes of all consumer and stakeholder outreach events using a timeline (one-on-one contacts with individual consumers need not be enumerated). Describe stakeholder activities that you found particularly beneficial. Include copies of any consumer or stakeholder surveys (including provider surveys) that you conducted and summarize the results of those surveys.

The Family Partnership Care Management Coalition was extremely active in stakeholder involvement and communication. Several documents are provided in Section 3 Exhibits to demonstrate the FPCMC commitment to stakeholder involvement and communication:

- **Stakeholder Participation Plan**
- **Key Stakeholder Guide**
- **An RFP for consulting on stakeholder communication strategy (Creatonomy became the consultant)**
- **A power point presentation template used by all county planning partners for various audiences and presentations**
- **The agenda for several educational meetings for county staff**
- **A training announcement and outline for team-based management and decision making training for county staff**
- **The agenda for Family Care Consumer Corps Training hosted by CWAG**
- **Several screen shots for the FPCMC web site. Including are links to a wide variety of documents, meeting and training announcements and opportunities for stakeholders to stay informed and educated on the progress of the coalition toward implementation**
- **Frequently Asked Questions that were updated on an occasional basis as planning moved toward implementation.**

Section 4 – General Communication

Describe the methods by which you distributed information about planning meetings, distributed meeting minutes, and notified the public about forums, training and information sessions. Provide a summary of contacts with media regarding your planning or issues related to the

expansion of managed long-term care in your geographic area and photocopies of pertinent newspaper articles.

The website was the primary vehicle for communication. Related documents are provided in Section 3 Exhibits.

Section 5 – Program Development

Describe your progress toward identifying the program model that you selected to be the focus of your planning and implementation efforts. List the pros and cons of program models **for your planning partners** that your planning group identified in the course of your deliberations.

FPCMC partners spent considerable time exploring model options and their implications. The result of this exploration and deliberation eventually led to a model where the Managed Care Organization partners bid on managed care contracts for the region. To get to the point of RFP responses, the coalition used several tools and resources in its deliberation. These documents are included in Section 5 Exhibits:

- **FPCMO Public/Private Model design 9-6-06**
- **FPCMC Model Options with Advantages and Disadvantages – 10-20-06**
- **Potential Governance and Risk/Reward Sharing Models**
- **Governance Recommendations 11-11-06**
- **FPCMC Model for Long-Term Care Managed Care 2-28-07**
- **The May 3, 2007 letter to DHFS requesting the release of an RFP to implement managed care programs in the region.**
- **The 6-5-07 version of the RFP Preparation Inventory**
- **FPC IT Subcommittee recommendations**

Describe the progress your planning group made in the following areas identified in your Grant Agreement, Exhibit 1:

- Legal and Operational Platform for Regionalized Governance
 - **The corporate and legal structures of Community Care, Inc. and Care Wisconsin First, Inc. have been used for the implementation and governance of long-term care managed care programs being implemented in the region.**
 - **A Regional Operations Council has been formed. The MOU forming this council is included in Section 5 Exhibits.**
- Establishment of Risk Reserve and Business Solvency Plan
 - **The risk reserves and business solvency of Community Care, Inc. and Care Wisconsin First, Inc. are being used for managed care programs being implemented across the region.**
- Coordination or Integration with Acute and Primary Health Care
 - **Through the Community Care, Inc. Family Care Partnership Program in Waukesha, Washington and Ozaukee counties and the PACE program in Waukesha County and through the Care Wisconsin First, Inc. Family Care**

Partnership Program in Columbia, Dodge and Jefferson counties acute and primary health care are integrated for enrollees.

- **In all counties, Family Care provides for coordination with acute and primary care services.**
- **Establishing a Governing or Oversight Board**
 - **Existing and certified governing boards of Community Care, Inc. and Care Wisconsin First, Inc. are providing governance and oversight.**
 - **A Regional Operations Council has been formed. The MOU forming this council is included in Section 5 Exhibits.**
 - **Both Community Care, Inc. and Care Wisconsin First, Inc. are reporting to local ADRC Boards.**
 - **Community Care, Inc. is establishing advisory boards in Sheboygan/Ozaukee counties and Washington/Waukesha counties to assist in the oversight and refinement of programs.**
- **Implementation and Management Plan for Care Management Provision**
 - **Care Management is provided through Community Care, Inc. and Care Wisconsin First, Inc. as certified by DHS.**
 - **In some counties the MCO is contracting with existing Human Services staff for care management. These counties include: Sheboygan, Ozaukee, Washington, Columbia, Dodge, Jefferson, Green Lake, Marquette and Waushara counties. Some LSS staff is also being contracted for care management services in Waukesha County.**
 - **The Care Management rate setting model established by the coalition is included in the Section 5 Exhibits.**
- **Provider Network Development**
 - **Healthcare and long-term care network services are provided through Community Care, Inc. and Care Wisconsin First, Inc. as certified by DHS.**
- **Administrative and Financial Systems**
 - **The Administrative and Financial Systems of Community Care, Inc. and Care Wisconsin First, Inc. are being used for managed care programs being implemented across the region.**
- **Information Technology and Reporting Systems**
 - **The Information Technology and Reporting Systems of Community Care, Inc. and Care Wisconsin First, Inc. are being used for managed care programs being implemented across the region.**
 - **FPC It Sub Committee Recommendations can be found in Section 5 Exhibits**
 - **Concerns with transitioning data from county systems to MCO systems were reviewed and discussed. These concerns still remain.**
- **Quality Management Systems**
 - **The Quality Management Systems of Community Care, Inc. and Care Wisconsin First, Inc. are being used for managed care programs being implemented across the region.**
- **Eligibility and Enrollment Systems**
 - **The eligibility and enrollment systems of local or multi-county ADRCs are being used for eligibility and enrollment into managed care.**
- **Coordination with Adult Protective Services and Statutory Requirements**

- **Coordination with Adult Protective Services and other statutory requirements are being managed via a memorandum of understanding between each MCO and each individual county. Resolving issues is accomplished through collaboration between agencies.**
- **Conversion of Present Waiver Caseload and Waiting Lists**
 - **The conversion of the present waiver caseload and enrollment off of waiting lists is being handled through an enrollment plan created by each county in collaboration with each MCO affiliated with the respective county. DHS has approved each county-based enrollment plan.**
The following schedule was created in the planning and then adjusted due to either state budget approval delays or county specific issues that slowed implementation:

[Key FC = Family Care; FCP = Family Care Partnership; CCI = Community Care, Inc.; CW = Care Wisconsin; CLA = Community Living Alliance]

Implementation Date	Planned as of 10-31-07	Actual as of 7-15-08
February 1, 2008	Sheboygan FC [CCI]	Sheboygan FC [CCI]
March 1, 2008	Columbia FC [CW & CLA] & FCP [CW] Ozaukee FC [CCI]	Columbia FC & FCP [CW] Ozaukee FC [CCI]
April 1, 2008	Washington FC [CCI & CW] & FCP [CCI] Dodge FC [CW & CLA] & FCP [CW] Ozaukee FCP [CCI]	Washington FC [CCI & CW]
May 1, 2008	Sheboygan PACE [CCI] Dodge FC [CW & CLA]	
June 1, 2008	Waushara FC [CW & CLA]	Waushara FC [CW]
July 1, 2008	Marquette FC [CW & CLA] Waukesha FC [CCI & CW]	Marquette FC [CW] Waukesha FC [CCI & CW]
Implementation Date	Planned as of 10-31-07	Planned as of 7-15-08
August 1, 2008	Green Lake FC [CW & CLA]	Dodge FC [CW] Green Lake FC [CW]
September 1, 2008	Jefferson FC [CW & CLA] & FCP [CW]	Jefferson FC & FCP [CW]
January 2009	Green Lake FCP [CW & CLA] Marquette FCP [CW] Waushara FCP [CW] Sheboygan FCP [CCI]	Washington FCP [CCI] Ozaukee FCP [CCI] Waukesha FCP & PACE [CCI]
July 2009	Walworth FC [CCI & CLA]	Walworth FC [CCI & CW]

Section 6 – Aging and Disability Resource Center (ADRC) Planning

Describe involvement of your planning group in activities to achieve readiness for an operational ADRC or ADRCs within the counties or geographic area that is the focus of your planning. Describe the process of planning and the current state of readiness for each ADRC planned to

serve consumers in the geographic area of your consortium. Describe the process used by your member counties to decide whether to pursue regionalized ADRCs.

The FPCMC used a workgroup of its members to plan for implementation of ADRCs or evolving first and second generation ADRCs to be certified in concert with managed care implementation. An ADRC Planning Matrix document is included in Section 6 Exhibits. Also included in Section 6 Exhibits is an educational Power Point created by the FPCMC.

The ADRC Workgroup identified one area that would lend itself to regional planning around the Beacon Data Base used by all ADRCs. The Southeastern Wisconsin Area Agency on Aging and AgeAdvantAge AAA, Inc provided two proposals for region-wide coordination of the database. Copies of these proposals are included in Section 6 Exhibits. Part of the project was funded through the Systems Change Grant and counties funded the other portion. DHFS determined that the funding from the Systems Change Grant would cover the time up to two months prior to the opening of an ADRC. After that timeframe, funding for the project was covered by ADRC funding. A breakdown of the Beacon project is covered in a spreadsheet provided in Section 6 Exhibits.

The other issue that surfaced as a part of the ADRC discussions and eventually led to the formation of an Economic Support work group, was the adequacy of funding for economic support staff. Several sessions were held to understand the funding, as it existed in Family Care pilot counties. As a result correspondence to DHFS was created and sent in this regard. Copies of this documentation and its response from Secretary Kevin Hayden are included in Section 6 Exhibits.

Section 7 – Major Milestones

Provide a visual and narrative description of major milestones achieved by your planning group. Achievement may be in many areas: communication, group process, strategic planning, consensus on plans or issues, formation of business partnerships or governance structures, etc. Summarize the progress that your planning group has made, overall, toward planning for expansion of managed long-term care. Identify any significant deviation from the planning timeline that was included in your grant proposal. Describe challenges faced by your group as it proceeded through planning activities.

A milestone and timeline summary is provided in Section 7 Exhibits.

Section 8 – Budget Narrative

Attach a final budget showing detail of expenditures by item that reconciles with the final amount your consortium billed to DHFS on CARS.

In December 2007, the FPCMC Steering Committee submitted a revised budget. DHFS rolled over \$100,000 of unused funds from the Southeastern Wisconsin Care Management Organization (SEWCMO) Grant. Since several of the SEWCMO counties were moving forward on implementation through FPCMC and the funds were not distributed, the

combined \$200,000 was made available to the FPCMC. The revised grant budget proposal is provided in Section 8 Exhibits.

A budget-spending summary is provided in Section 8 Exhibits.

Section 9 – Next Steps/Implementation

If not discussed elsewhere in this report, indicate when your planning consortia may be in a position to respond to an RFP from DHS for managed long-term care, if you have not done so already. To the extent possible, describe the activities your group anticipates undertaking following the completion of this grant period. Identify information, technical assistance or support that would assist your group to achieve activities after the grant period.

As described in Section 5, implementation in this region is underway. The following chart indicates the remaining implementation start dates:

Implementation Date	Planned as of 10-31-07	Planned as of 7-15-08
August 1, 2008	Green Lake FC [CW & CLA]	Dodge FC [CW] Green Lake FC [CW]
September 1, 2008	Jefferson FC [CW & CLA] & FCP [CW] Dodge FC [CW & CLA]	Jefferson FC & FCP [CW] Dodge FC [CW]
January 2009	Green Lake FCP [CW & CLA] Marquette FCP [CW] Waushara FCP [CW] Sheboygan FCP [CCI]	Washington FCP [CCI] Ozaukee FCP [CCI] Waukesha FCP & PACE [CCI]
July 2009	Walworth FC [CCI & CLA]	Walworth FC [CCI & CW]

The Operations Council will be implemented in the fourth quarter of 2008.

Conclusion:

We, the partner members of the Family Partnership Care Management Coalition are proud of the progress made in this region since the Systems Change Grant was awarded in the fall of 2005. We are actively moving forward on long-term care reform, ADRC implementation and managed care implementation. We have done so in a collaborative and transparent way and believe we have created a model for others to consider in the future.