

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: IRIS Advisory Committee		Time Started: 9:30 am	Time Ended: 2:04 pm	Attending: Committee Members: Andrew Coleman, Anne Karch, Fil Clissa, James Valona, Jason Glozier, Kathi Miller, Martha Chambers, Mitch Hagopian, Molly Bandt, Rosie Bartel, Sue Urban DHS Staff: Alicia Boehme, Amy Chartier, Ann Lamberg, Christian Moran, Christine See, Daniel Bush, Grant Cummings, Kyle Novak, Leon Creary, Sheldon Kroning, Heidi Herziger, Michelle Osness, Steve Gress, Shelly Glenn
Date: November 15, 2022				
Location: Zoom Webinar		Presiding Officer: Christian Moran, DHS, Director, Bureau of Programs and Policy Alicia Boehme, DHS, Director, Bureau of Quality Oversight		

Minutes

Committee Members Absent: John Donnelly

Meeting Call to Order

- Introductions
 - Meeting called to order at 9:32am by Christian Moran
- Minutes reviewed. Motion to approve by Rosie. Second by Mitch. Approved unanimously.

Special Recognition – Mitch Hagopian, presented by Alicia Boehme

- Alicia provided remarks and recognized Mitch for his contributions to the committee and the participants in the IRIS program.
- Molly Bandt, Fil Clissa, Rosie Bartel, Amy Chartier, Kathi Miller, and Christian Moran also added their thanks and congratulations to Mitch on his retirement

Department Updates, presented by Christian Moran and Alicia Boehme

- Alicia reviewed her presentation on asset acquisitions. There will be listening sessions coming up in December. The FTC has also been notified of the intent to purchase.
- An updated status was provided on START. The Department expects movement on the committee in the new year. We need to confirm we have the necessary internal support.

No Committee Feedback.

- Christian provided an update on the EVV hard launch.

Committee Feedback:

Can IRIS Participants be disenrolled if their workers are not EVV compliant? Yes, they can. Beginning at hard launch, if EVV is not completed at 80% they can be disenrolled. The participant is the employer, and it is the duty of the participant to ensure compliance. Dana Raue is the expert on EVV. Amy Chartier added that this was outlined in the policy published in July 2021. It is not an immediate

disenrollment. It's a step-by-step process. It begins with meetings with the IC on how to address the non-compliance with the PHW. There will be conversations throughout a three-month period before the participant would be disenrolled. There will be consideration given to reviewing this at the next meeting. Also, there is a 60-day grace period for newly enrolled participants, including those who had left the program and then returned. Rosie asked if the service codes were connected. Amy said that they were in the Supportive Care Routine. Ann expressed some concern if we lose PHWs because of the requirements in light of the current caregiver crisis. She also expressed participants would know if the workers are trying to do the right things with EVV.

- Christian reviewed the HCBS Settings Rule Update

Committee Feedback:

Mitch asked if the public comment was concurrent with the CMS review. Christian clarified that CMS has begun their review, but CMS will not approve without public comments.

- Christian provided a status on the Tribal LTC Study Workgroup. The workgroup was restarted. Agencies are providing services but not being reimbursed for those services. They are meeting quarterly to provide information sharing and education. The November meeting was in Wausau. The group discussed contracting with MCOs and tribes. They will be devoting a workgroup session to IRIS as well. Next meeting is in February.

No Committee Feedback

Fiscal update presented by Dan Bush

The IBS update for January is on track. They are working on the screen application. Rosie and Ann volunteered to review the script at the last meeting. Dan confirmed that they would like them to assist. There is a webinar on December 1, 2022, for IRIS consultants to discuss the hold harmless clause and budget amendments. The webinar will be recorded. There are communications going to participants in December. The biennial budget included a personal care rate increase across all of the LTC programs including IRIS. The SDPC new max rate will be \$17.98/hr.

Committee Feedback:

Sue asked if the minimum rate would remain the same. Yes, it will. It is the statutory minimum wage. It will be applied the same as the last SDPC increase, at the request of the participant, not necessarily at plan update. Letters will be sent out in December, and the effective date will be January 1, 2023. Fil asked that the committee see the letter. Dan indicated that the draft could be sent. There was discussion regarding the effective date as it relates to pay period. In 2023, January 1 is the first day of the pay period. Ann recalled the prior letter and said it was very clear. Sheldon added that the increase must be requested prior to January 1st to be effective on January 1st. Rosie said her consultant was very good about communicating that. Amy added that the increase is not retro-active.

ARPA Updates presented by Christian Moran, Alicia Boehme and Christine See

- Christine provided an update on the Independent Living Pilot. There was GovD correspondence sent out regarding the ILSP. It will begin in July 2023. There was a link to the website with the announcement for application. There is an informational webinar scheduled for November 17, 2022, at 2:00pm. The link was provided to committee members following the meeting.

<https://www.dhs.wisconsin.gov/arpa/hcbs-ilsp.htm>

Committee Feedback:

Mitch asked how many counties would be involved in the pilot. It is dependent on how many apply.

- Christian updated the committee on the HCBS Grant Announcement. On November 3rd, the Department awarded \$12M for HCBS services in all 72 counties. This was the first phase. Second phase will be in February 2023 and will consist of an additional \$15M.

Committee Feedback:

Fil asked if the committee would receive information regarding what the grants are about. Kevin Coughlin said it is in progress.

Public Health Emergency Unwinding Update presented by Alicia Boehme

The Public Health Emergency will not be ending in January as the 60-day notice was not received. The next date will be in April 2023. We continue to work with provider to ensure plans are in place for when it ends.

Ombudsman Update presented by Kathi Miller

DME issues are experiencing longer than normal wait times on equipment repairs, over six weeks in some cases. Denials are also taking as long. They've had success in the past with using Medicaid agreements to provide clarification for providers. They will be reaching out to DHS for guidance. DRW increased in-home modification cases, NOAs for supportive home care supervision, and state fair hearings on OTEs. Any questions can be directed to Leslie Stewart at leslies@drwi.org. Everything else had been steady. Wage discussions have stayed the same.

Committee Feedback:

Amy asked if the DME repairs and OTE delays or denials were for Fee for Service. Kathi wasn't sure. Leslie could provide clarification. Kathi said that there were delays from the providers due to getting two bids. Mitch asked if the delay in DMEs was due to reimbursement rate or connection to the program. Kathi thought it was a combination of both. Who is paying certainly seems to be an issue. Jason echoed about the bids. IL Centers are hearing how hard it is to get three bids on home modification. It is most prevalent in the SE corner of the state. Mitch asked if there was still a three-bid requirement. Amy indicated there was, however, if participants are unable to obtain three bids, they can submit the names of providers they contact. They are able to move forward with that information. There have been no significant issues with that. Kathi asked if there was information on the participant educations, when filling out OTEs, that outlines that language. The IC is required to provide that information to the participant. Quality specialists can provide additional guidance. Amy provided an example where the provider said that IRIS would pay, and they moved forward without approval. The IC thought they did the participant education form, but they forgot. Submitting is a request and not the approval.

Public Comment

Ramsey Lee thanked the committee for meeting today. He encouraged people to join the Coalition to End Social Isolation which was a State of Wisconsin project. He asked that the EVV hard launch date be pushed back as it is causing a lot of issues for participants including himself. Internet issues can be a problem with some folks. He is worried about potentially losing PCWs, and it's so difficult to find workers already.

Lawrence Brown echoed Ramsey's comments on the lack of workers and internet connection issues with EVV. He feels workers should be education on EVV since he needs them to use it for his care work. He doesn't feel he should lose his benefits over non-compliance with EVV. He also asked for a delayed EVV hard launch. He feels it is a burden and that more time is needed for the full launch.

Rose Marsh asked for assistance with getting an EVV exemption. She is within 100 feet of the participant she is working with and believes EVV is inappropriate for that situation. She would like to speak with someone. Someone will contact her after the meeting.

Heidi Sheire asked if the PHE is being extended to April 11, 2023. Alicia indicated we have not received any information from the federal government yet, but that is the anticipated date.

372 Report presented by Heidi Herziger

Heidi reviewed her presentation with the committee

Committee Feedback:

Mitch said he is not seeing anything that matters to the outcomes of the program or participants in the survey. We should be striving to include performance measures that show participants are getting what they need. Sheldon added that the Participant Satisfaction Survey addresses those issues more specifically. Rosie asked if policy measures come from CMS. Sheldon said that CMS has the indicators, and DHS develops measurements. Rosie does a lot of work with CMS, and they emphasize quality over quantity. CMS provided very specific guidance to DHS on this at waiver renewal. This is DHS's way of responding to CMS's guidance.

NCI Data presented by Michelle Osness

Michelle provided an update on the NCI data. Think of it as a storybook with three parts: Highlight 2021 results; Things we've learned post-pandemic (survey modality); and Next steps for NCI. Trying to compare the 2021 results will be difficult. There is data for individuals with Intellectual and Development Disabilities only for 2021. The information is available online at <https://www.nationalcoreindicators.org/> Michelle outlined the findings presented in the weblink. Wisconsin is much higher in SDPC than the rest of the U.S. Wisconsin was 10-40% lower in service coordination. Participants are not discussing learning new things at their service planning meetings. This was the first year doing remote survey, so that needs to be noted. There will be no handout for this year as it is very different for 2021.

Committee Feedback:

Mitch asked if the data was from a combination of programs or one program. The information includes Family Care, IRIS, and PACE for IDD. On the AD side, it is broken out. They aim for a statistically significant number but it was not achieved in 2020 or 2021. The data is currently broken out by a remote survey with a different group. Many were experiencing survey fatigue or needed technical assistance. Many were no-shows. NCI will be rebranding as indicated on the website. NCI is included in the HCBS quality measure set. Wisconsin specific questions were changed. As more states use NCI, we are able to understand what it looks like across the nation for those who are enrolled in similar programs, understanding there are very different structures in each state. You can contact Michelle with additional questions at MichelleM.Osness@dhs.wisconsin.gov

LTC Program Decision Tree Project presented by Christine See

Christine asked for feedback from the committee for the following:

- What about the IRIS program is appealing?
- What does IRIS offer that other programs don't?
- What other key decision factors did you use?
- Any additional thoughts or questions?

Committee Feedback:

Sue said that many come for SDPC only. Christine said they used the comparison grid for comparing IRIS and Family Care. There were more similarities than differences. Sue added that there is full

employer and budget authority in IRIS and not in Family Care. Rosie added that she wanted control of her life and home, who came and went. She said there was a sacredness to her home. Her ability to make decisions was not challenged, and IRIS gave her that freedom. Mitch mentioned that you really can't self-direct in Family Care, only for supportive home care, person care functions. Christine said that DHS has been hesitant to use subjective tools. A draft will be brought back to the committee if one can be created.

Ann had family members in both programs. In Family Care, you do not know what your budget is, and there is no budget authority. Family Care also has a nurse included on the team. She experienced new nurses every six months. She added to be careful when saying there are a lot of similarities between IRIS and Family Care, because there are not. Perhaps do a short video of people explaining the differences in those videos. Martha echoed what has been said. IRIS has been wonderful for her. She likes being able to hire her own workers. There isn't a team of people assisting and making suggestions for care. She has budget authority over what she chooses. IRIS has been able to adapt quickly to changes with the IC involvement. Christine said that options counseling at the ADRCs is talking about each program. Enrollment counseling is after that point. The counselor can't make suggestions which is why they are looking at a decision tree. Rose said the key is to have the information in plain language. The participant needs to have control, and if that's the case, they would need IRIS. Family Care is more structured and provides specific direction. Kathi added that experience is that people are able to have cares in the community as opposed to only in their home. In the past, employment has also come up as well. The long term care funding in IRIS was critical.

Policy and Topic Tracker presented by Amy Chartier

Amy reviewed the policy and topic tracker. There was no feedback nor any additional requested topics from the Committee.

IRIS Provider Agreement Update presented by Leon Creary

Leon reviewed the presentation on the IRIS Provider Agreement Updates.

No Committee Feedback

Policy Update presented by Amy Chartier

Amy presented the policy updates for IRIS.

- **EVV**
There was an addition of a grace period allowing 60 days for participants to become familiar with program requirements and provide training to PHW, only for hourly PHWs. It doesn't extend to provider organizations. There is additional language regarding power outage to streamline approvals which extends to provider agencies. We will get this out as quickly as possible.
- **Eligibility**
There has been a lot of discussion regarding SSIE, enrollment with IAC and contractors. That language is now in review with leadership and should be coming out shortly.
- **Enrollment/Disenrollment**
There have been several conversations with contractors regarding this language. Feedback was requested with a deadline of last week. Discussions will now begin regarding disenrollment language.
- **Service Authorization**
This is not in reference to the policy discussed at the last meeting regarding the review

process. There is guidance to the ICAs regarding the review process. This is a subchapter of the IRIS service planning section. This has to do with instruction of proper creations and utilization by ICAs. The uploading of the expenditure data has been a long-standing concern. There have been several reviews with contractors. It is in final drafting stages, and it will be presented in an upcoming meeting.

- **Budget Amendment**
There were two initial discussions with contractors to elicit feedback. Drafting of the language will begin, and the language will evolve over a series of meetings. This is a very complicated and nuanced process. That language will be coming to the committee in the next few meetings.
- **SDPC State Plan**
The SPA has gone through initial review with CMS a month ago. They discussed changes and addressed questions. They've since provided questions and updates to language adding EVV and clarifying language at CMS's request. We will be working on SDPC policy for consistent policy language. That will be coming to the committee in the next few meetings.
- **Service Authorization Request Review and Process**
This was updated and reviewed at Ann's request. Updates are in progress based on discussion at the last meeting. The annual re-request has been removed entirely, only required with the initial submission or with a significant change. We also removed language related to the expedited request option. It is already a tight turnaround of five days. The language was updated to "verified" rather than "approved" or "denied". The purpose wasn't to approve or deny, but to make sure ICAs were using the process properly. Was the service code accurate and is there a qualified provider with the good or service authorized with that plan. The ICA is responsible for issues with an NOA. We have been actively working with ICAs in SharePoint since November 1st. There have been 3 in November so far. One didn't need to be submitted. One was discussing internally for proper code. The final was a simple review and approve. A webinar in SharePoint was re-recorded removing the expedited review and re-request language change from approve/deny.

Committee Feedback:

Ann asked if there was an outcome from the specialized goods and services discussion from last time. Amy said that would be coming in an update. Mitch commented on the SDPC SPA. What did the document look like that was filed with CMS? Amy thought Kyle had responded, but she will follow up with her. With regard to the policy language, they will be working closely with Sue Urban and her team. Mitch asked if this is the policy that relates to the four or five services? Yes, per Amy. BAs are separate from this. BAs are not required to be re-requested annually unless time limited service. In this process, this is for goods and services that fit within their monthly budget. Ann thanked Amy for the work on this.

Committee Business presented by Christian Moran

- Kathi requested meeting dates for 2023
- There are currently 5 consumer seats open, please send any recommendations. Alicia and Christian will be recruiting as well

Adjourn

Meeting unanimously adjourned at 2:04pm

Prepared by: Shelly Glenn on 11/23/2022.
Minutes approved by Committee on 1/24/2023