

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

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| Name of Governmental Body: IRIS Adviosry Committee | | Attending: Committee Members: | |
| Date: 11/26/2019 | Time Started: 9:00 a.m. | Time Ended: 3:00 p.m. | Monica Bear, Julie Burish, Martha Chambers, Dean Choate, Fil Clissa, John Donnelly, Vicky Gunderson, Mitch Hagopian, Maureen Ryan, Jill Walter, Sue Urban DHS Staff: Jasmine Bowen, Amy Chartier, Seldon Kroning, Sam Ninnemann, Kyle Novak, Dana Raue, Christine See, Suzanne Ziehr |
| Location: Warner Park Community Center, Community Room 1, 1625 Northport Drive, Madison, WI 53704 | | Presiding Officer: Betsy Genz, Director, Bureau of Adult Programs and Policy | |

Minutes

Meeting called to order

- Motion to approve minutes by Mitch Hagopian, seconded by Julie Burish

Department Updates, presented by Betsy Genz, Dana Raue, and Amy Chartier

- **EVV**
 - November 19th forum recording will be on the EVV website by end of November
 - Timeline updated postponing implementation until September 1, 2020
- **SDPC**
 - Wage increase letters have been mailed to participants
 - Rate range will now be \$7.25 to \$14.43 per hour
 - Rate range is effective beginning January 5, 2020
 - The State does not automatically make the change in rate
 - The change needs to be requested by IRIS participants
 - There will be no retroactive rate adjustments
- **Membership**
 - Letters will be sent out in December after Jim Jones reviews letters of interest
 - Membership outreach
 - Looking to add additional participants to the committee, specifically a PHW and providers
 - Anyone interested should send a letter of interest to Suzanne Ziehr (Suzanne.Ziehr@dhs.wisconsin.gov)
 - **Comments from committee**
 - Committee would like to have say in who will be on the committee/review applications
- **Meeting locations**
 - Request to have meetings travel around state to allow others to participate
 - May meeting will be in Eau Claire/La Crosse
 - September meeting will be in the Fox Valley
 - Will talk further about hotel accommodations and timing of these meetings

Workgroup Updates, presented by Maureen Ryan, Jill Walter, and Vicky Gunderson

- **Accessibility Assessment**
 - Having participants write up what they are going through to get examples
 - Correcting work instructions to make sure they are consistent for both budget amendment and onetime expense
 - Reasons why participants are unable to get three (3) bids will be on the form in addition to a note in WISITS
 - DHS is working on the provider document console that will allow (not PHWs) FEAs to pull documentation for approved vendors and help with authorizing services

- **Participant-Hired Worker Paperwork Streamlining**
 - No update
- **IRIS Service Authorizations**
 - Moving forward to have multiple workers on an authorization

Scorecard Update, presented by Jasmine Bowen

- Went through PowerPoint showing results of Scorecard pilot
- Scorecard will be updated annually in June or July, depending when information from data sources is available
- Jasmine will review the graphs, update, and they will be sent out to committee members, along with the completed scorecard
- **Committee suggestion**
 - Use a star rating where you total up the number of stars for the FEA/ICA overall and then have comments from current participants that can also be reviewed
 - This should be similar to what public is used to seeing online at other sites
 - Complete a survey exploring why participants switch ICAs or FEAs

Background Check Workgroup Proposal, presented by Mitch Hagopian and Sheldon Kroning

- With all background check appeals, the participant will make the ultimate decisions to hire or not hire the individual
- For all serious crimes that currently prevent an individual from being an approved PHW, a process similar to the rehabilitation review will be created for IRIS
 - DHS Office of Legal Council (OLC) will be involved when developing the process
 - There will be a panel that will meet and meet with the individual to review their appeal
 - The participant is the one that must initiate the rehabilitation review process
 - Make-up of panel will be decided after conversations with OLC and what needs to be done/required of the panel members.
- A process will also be developed for non-serious crimes (i.e. drug convictions and theft) that currently prevent an individual from becoming an approved PHW
 - These will have a pared down process from the more serious process and some may go in front of the review panel, but will mainly be a paper process
- Need to be cognizant that even if the person is not employed, this is still someone that is still going to be involved in the participant's life. Need to be aware of the participant's safety and also give the participant an "out" with regard to offering them employment
- Once DHS leadership has approved the process, then work on operationalizing it can commence.
 - No current timeline to implement the new processes
- It is the intention to align the criminal convictions that prohibit employment with the offenses outlined in 50.065 and Chapter 12.
- **Committee suggestions:**
 - PHW must pass IRIS background check policy so waiver shouldn't need to change, policy changes will be necessary.
 - Make sure the applicants can make it to the panel discussions – travel, etc.
 - Evaluate participant being part of the process
 - Panel should consider who else lives in the home where the care is being provided and consider if there is a risk that they may be victimized if this person is working with the participant
 - Someone needs to check with the participant that they are okay with the process and potential PHW
 - There should be a discussion required between the IC and participant before starting this process

Public Comment

- Ron Preder
 - Submitted comments via email that were read at meeting:
Good Morning,

My name is Ronald Preder and I am a father and guardian for my son Scott, an IRIS Participant.

On the agenda for the meeting tomorrow there is a period for public comment. I have been following and trying to get up to speed on the upcoming implementation of the EVV (electronic verification) program that DHS will be rolling out this coming year. As part of that effort I attended the most recent public forum held this past week in Neenah. I believe this issue deserves consideration at this larger and more diverse IRIS Advisory Committee meeting and as such would request that this issue and my attached documentation and comments be included in the public comment section of the meeting on Tuesday and shared with members of your committee.

Specific concerns include:

Lack of transparency on the part of DHS in presenting unbiased information specifically as it pertains to CMS guidance concerning self-directed care and "live in" caregivers. Clearly this issue can have negative effects on the IRIS disabled population and the manner in which they attempt to meet their care needs.

The information presented at the forum this past week suggests that an IRIS participant who self directs their care will be lumped into the larger group of provider agencies subject to the same EVV requirements. This approach does not take into account the emphasis the CMS guidance placed upon self-directed care and the need for the state program to be "minimally burdensome" to providers and participants. It should be noted that the "minimally burdensome" language is also included in the underlying Federal Cures Act, (Authority and requirement for the states to implement EVV. ****CMS guidance issued this past summer indicates participants who receive self-directed care from "live in" caregivers are exempt from the federal requirements of EVV reporting.*

The EVV implementation focus was to be centered on "waste and fraud". I am not aware of any examples of severe or widespread waste or fraud associated with the IRIS population that self directs their care. A review of the 2016 Wisconsin Inspector General's report seems to support my thoughts. As such I believe that the direction that DHS is taking concerning this EVV implementation will make it more burdensome for the disabled population to access their cares through self direction and be a deterrent for disabled individuals who may want to choose this method of care in the future. ****It should be noted that there have been efforts by Wisconsin in the past to limit the scope and participation of disabled individuals seeking to meet their care needs utilizing the IRIS program.*

Additional documents attached include: comments I provided to the DHS-EVV website this morning and the CMS guidance document released this past summer.

Thanks you for your time,

Attached to the email:

Good Morning,

I have both questions and some comments that I would like included in the record concerning DHS's rollout of the EVV program.

Questions

Wondering who the IRIS participants or family members are who were represented on the EVV advisory group?

There are five different EVV system models discussed in the CMS Bulletin dated May 16, 2018 (subject: Electronic Visit Verification). Which model is Wisconsin DHS most closely following in their implementation of the EVV system?

Has DHS made the decision to include and treat all IRIS participants who self-direct care including those who use "live in" caregivers for personal care as "Provider Agencies"?

Comments/Concerns

My concern is whether IRIS participant's and/or family members who self-direct their own care using "live-in" caregivers were adequately represented on this committee.!!

CMS guidance issued in May of 2018 indicates states should take into consideration how self-directed care may be affected by the implementation of their EVV program. Additional CMS guidance issued during the summer of 2019 indicates individuals or participants receiving personal care from "live-in" caregivers are exempted from the requirements of the CURES ACT.

Reviewing what I could find out about the timeline associated with this implementation it appears that the decisions to bring Sandata on live to administer this program was done early on in the process and certainly before any of the forums were held. There was little or no discussion during the Sandata portion of the presentation concerning the scenario of self -directed care being provided by live in caregivers.

It would appear based upon the information presented at this past forum that DHS (**not the Fed's**) have already decided to lump IRIS participants who self-direct their PC (through live in caregivers) in the same category as all other personal care providers. Since 2011 I have helped my son (an IRIS participant) administer his self-directed care needs, including using "live-in" caregivers a tha *(attachment ended here)*

Attached was also CMCS Informational Bulletin dated August 8, 2019

- Elaina Seep:
 - Provides Long Term Care technical assistance to two (2) tribes. There is no one on committee representing tribes. There is a caregiver shortage in tribal areas. Tribes are their own government and need to see how the background check process or hiring process takes into account what the tribes do. There should be a tribal presence on the committee. Make sure the cultural competency piece is included in IRIS processes. ICs should know how to interact with tribal agencies and how to inform participants to do so. There should also be shorter time for returning of calls, no longer than 48 hours.
- Ann Karch:
 - Made same comment a year ago, SDPC wage increase is awesome. That is two (2) SDPC wage increases in 12 months. Having the IAC on the road is good for next year. She will work to get attendance in Fox Cities (used to live there). Monthly learning circle, with Love Dane, comments are that they are finding ICs to be unresponsive. Would like to be able to tell people what the next step should be with unresponsive ICs. Suggest the Department makes a simple document for what to do if not receiving info from ICs (i.e.: 1) re-email IC. 2) Contact this supervisor at each ICA.) Ann happy to draft something for State to review. Over past 6 months one (1) frail elder and two (2) with those aging out of children's were advised there is no waiting list for FC and a 4-5 month waiting list for IRIS. Someone should let ADRC know this is not okay and if there is a waitlist then it should be the same for both programs.
- Wendy Kaplan
 - Guardian and parent of a gentleman with complex mental and physical health needs. Son comes home once or twice a month for the weekend. Also, caregiver for other family members with medical needs. Over the past several months, her family members have had a significant number of medical

appointments. As a guardian, she attends many of these appointments. In addition to medical concerns, there are other issues including police interventions. The support broker has provided invaluable services during these times of crisis. The provided definition of support broker is one who helps navigate systems. Son may be going without services of support broker for the next 2 months. Before IRIS, the support broker did 42 hours/month of services for 6 years, once son transitioned to IRIS, the support broker can only provide 8 hours of services.

Waiver Renewal, presented by Kyle Novak

- Went through PowerPoint and handouts related to 5 draft areas with waiver updates (Money Management, Community Transportation, Support Broker, Individual Directed Goods and Services, and ICA/FEA Services)
- Committee members can provide additional feedback on these items after the meeting
 - Submit to Suzanne by December 13, 2019
- Will have interim meetings as necessary to review other aspects of the waiver
- Money Management
 - Goal is to have this as a customizable service depending on the needs of the participant
 - State would be looking at vendors to provide this service; what they look like are unique across the state
 - Rep Payee services are very limited compared to Money Management services and participants asking for more than what a rep payee can provide
 - SSA leans towards not delegating a rep payee for those that receive Medicaid Self Directed Services
 - Need to be careful not to cross the budget and employer authority line
 - **Committee suggestion:**
 - Requests around this require varying skill levels and will need multiple providers
- Community Transportation
 - Provider qualifications are different and are verified by the participant
 - These qualifications are in addition to the other requirements for all IRIS providers
 - Uber and Lyft are not currently included in statutory language; researching if these providers could be included for both Family Care and IRIS and if so, could it be done through an amendment
 - Changed name of service to better capture scope and intention of the category and align it with Family Care
 - Project SEARCH coverage will be investigated; will clarify what the responsibility of the school is with regard to support needs.
 - Secondary Education should be addressed, as that responsibility no longer falls to the Department of Public Education.
 - **Committee Suggestion:**
 - The committee should have input on what is included in handbooks and manuals. Concerned that removing lists of what is included and excluded in the definition in the draft waiver could be a way to narrow the service without public comment.
 - Consider reimbursing unloaded miles at a lower rate
- Support Broker
 - Aligned definition with CMS requirements
 - Clarified that participant employer authority and budget authority responsibilities may not be delegated to this service
 - Not allowing support brokers to provide other services helps address potential for fraud, waste, and conflict of interest
 - **Committee Suggestion**
 - State that support brokers can't have other lines of services or that they cannot suggest their other services
 - Should look at what the support broker can do; this definition keeps out what is really needed
 - Support brokers have intimate, historical relationships with participants; allowing support brokers to provide services would be beneficial and could replace what parents do as they age

- Individual Directed Goods and Services
 - These changes align with CMS requirements
 - Help address services that are categorized incorrectly
 - **Committee Suggestion**
 - Consider services that need to continue indefinitely; a waiver is about maintenance at its heart
- ICA/FEA Services
 - Not much content change for these areas
 - Clarified ICA's responsibility to assist participants with eligibility when requested
 - Separate from the waiver change, interChange will start showing IRIS enrollment and the ICs will receive predictive reports that will make providing assistance with eligibility easier
 - Currently find this out retroactively
- **Committee suggestion**
 - Would like handouts prior to meetings for waiver topics so can have more of an opportunity to review/prepare

Adjourn

- Future meeting topics
 - Waiver renewal will cover most of January meeting
 - Update on recommendations related to FEA survey
 - May IRIS IAC will be May 19, 2020

Prepared by: Suzanne Ziehr on 11/26/2019.

These minutes are in final form. They were presented for approval by the governmental body on: 1/28/2020