



Charter

for the

IRIS Advisory Committee

I. Name

The IRIS Advisory Committee

II. Authority

The IRIS Advisory Committee, previously known as the SDS Waiver Implementation Advisory Committee and the IRIS Implementation Advisory Committee, was established in 2008. The committee is referenced in the Wisconsin 1915 (c) Home and Community-Based Services Waiver WI.0484.R02 – May 01, 2016 as authorized by the Centers for Medicare & Medicaid Services with the following language:

2. Brief Waiver Description

OIM has an IRIS Advisory Committee that meets bi-monthly. This is an active advisory group with subcommittees that meet as needed to address issues and projects.

6. Additional Requirements:

I. Public Input: The Department has an IRIS Advisory Committee that meets bi-monthly. The Committee provides input and makes recommendations to the Department related to IRIS Program operations and policies. Members of this advisory group include IRIS participants, family members of IRIS participants, and representatives from a wide variety of providers and advocacy groups representing the needs and interests of all three target groups served by the IRIS program.

Appendix A: Waiver Administration and Operation
6. Assessment Methods and Frequency

IRIS Advisory Committee, and the associated ad-hoc sub-committees, is an external public entity that serves as an advisory group providing recommendations for improvements and policy changes to OIM. The committee provides insight to proposed changes to IRIS waiver program policies and procedures, implementation of program operations and infrastructure, and reports produced by contracted provider agencies. The IRIS Advisory Committee meets every other month. Subcommittees of the IRIS Advisory Committee meet on an as needed basis upon specific program needs. OIM maintains agendas and meeting summaries of all IRIS Advisory Committee and sub-committee activities.

Appendix H: Quality Improvement Strategy:

System Improvements

OIM seeks input from the following entities external to DHS relative to the prioritization of quality improvement strategies when appropriate:

- * Department of Justice concerning matters of program integrity*
- * IRIS Advisory Committee regarding changes to policies, work instructions, and process*

System Design Changes

i. OIM documents results of system change activities in a format to share as appropriate with DHS leadership, the IRIS Advisory Committee, the IRIS consultant agencies, the fiscal employer agents, IRIS participants, and other stakeholders as appropriate depending on the nature of the change.

III. Reporting Relationship

This committee is authorized by and will serve as a resource to the Division of Medicaid Services.

IV. Mission

The Department of Health Services' mission is to protect and promote the health and safety of the people of Wisconsin. A collaborative approach to this mission is essential. The IRIS Advisory Committee provides advice to the Division of Medicaid Services that strives to ensure everyone in the IRIS program lives their best life.

V. Responsibilities

The committee is responsible for providing advice related to:

- Improvements and policy changes
- Proposed changes to the program policies and procedures
- Implementation of program operations and infrastructure

- Reports produced by contracted provider agencies

The IRIS Management Section is responsible to share results of system change activities as appropriate with the committee.

VI. Description of Duties/Functions

The IRIS Advisory Committee is expected to be a committee that provides advice to the Division of Medicaid Services to enable them to administer the IRIS program within the allowances of the waiver. The committee members may be asked to review and provide advice to the Division of Medicaid Services on the following:

- Consumer-facing documents, materials, and tools
- Program policies, work instructions, and processes
- Information and data used to monitor the operations and quality of the program
- Program changes based on operational and quality information
- Quality improvement in program operations to mitigate issues, and remove barriers for participants
- Training, outreach, and education materials
- Implementation of regulations

VII. Relationship of Committee to the Division of Medicaid Services

It is the role and sole discretion of the Division of Medicaid Services to enact IRIS policy and administer the IRIS Program. The IRIS Advisory Committee's advice will be considered as the Division of Medicaid Services carries out these responsibilities.

VIII. Duration

The IRIS Advisory committee is convened at the discretion of the Division of Medicaid Services.

IX. Membership

Membership on the committee will be made up of individuals who have relevant knowledge, experience, expertise, and community relationships that will allow the members to present ideas, suggestions, opinions, facts, or topics to the committee that are relevant and productive for the betterment of the IRIS program. Members are appointed by the Division of Medicaid Services, Medicaid Director.

Composition: The IRIS Advisory Committee will consist of eighteen (18) members appointed by the Medicaid Director. Committee members will include IRIS participants, family members of IRIS participants, and representatives from a wide variety of providers and advocacy groups representing the needs and interests of all three target groups served by the IRIS program.

Division of Medicaid Services staff, including staff from the IRIS Management

Section and other bureaus within the Division of Medicaid Services will be in attendance at meetings.

Term: A term of membership shall last for up to three years at the discretion of the Medicaid Director.

Dismissal: Members who are absent without reasonable cause and/or advanced notice from three meetings during a rolling twelve (12) month period will be dismissed from membership. Those members dismissed from the IRIS Advisory Committee for absenteeism will be notified by the Division of Medicaid Services.

Roster: The Division of Medicaid Services will maintain the roster of IRIS Advisory Committee members and the attendance of the members.

Travel Arrangements: Members are responsible for arranging for all travel to and from meetings. Expenses, as permitted by state travel guidelines, may be reimbursed to IRIS Advisory Committee members. All travel claims must be submitted on the State-provided travel voucher forms and will be reimbursed at State rates. Before any claim can be processed, the member must have a W-9 Taxpayer Identification Number Verification form on file.

Contract Agencies: The agencies contracted by the Division of Medicaid Services for purposes of administering the IRIS program shall appoint a single IRIS Advisory Committee Liaison to attend the IRIS Advisory Committee Meetings.

X. Operational Guidelines

Meeting frequency: The IRIS Advisory Committee will meet bi-monthly.

Meeting notification and materials: Division of Medicaid Services will provide written notices of upcoming meetings and the agenda at least five business days before a meeting. The committee will be facilitated by the DMS designated facilitator.

Meeting location: Meetings will be held in an accessible meeting location. If the meeting is scheduled for at least 5 hours, lunch will be provided. A toll free conference line will be available for members to call in.

Meeting notes: Minutes of each meeting will be taken by Division of Medicaid Services staff and will be shared with committee members five business days prior to the next scheduled meeting. Minutes are considered final once reviewed and approved by the IRIS Advisory Committee.

Agendas: The Division of Medicaid Services will develop the IRIS Advisory

Committee agenda. The agenda will be distributed with the meeting minutes and any relevant information needed.

Public Comment: The Division of Medicaid Services will set aside time on each agenda for public comments. All individuals wishing to address the committee will be asked to identify themselves on a sign-in sheet in advance of the meeting with their name.

Those who would like to share their ideas and do not wish to speak are encouraged to submit their written feedback at the meeting or submit it for the IRIS Advisory Committee at DHSIRIS@dhs.wisconsin.gov.

Charter: The Division of Medicaid Services will revise and maintain the IRIS Advisory Committee charter as directed by the Division of Medicaid Services, Medicaid Director.

XI. Ad-Hoc Workgroups

Ad hoc IRIS Advisory Committee workgroups may be formed by the Division of Medicaid Services to address specific topics being reviewed by the Committee. The Division of Medicaid Services will develop the agenda and/or topics to be covered by the workgroups.