

OPEN MEETING MINUTES

Instructions: [F-01922A](#)

Name of Governmental Body: Wisconsin Long Term Care Advisory Council (LTCAC)			Attending: Audra Martine, Beth Swedeen, Christine Witt, Cindy Bentley, Dennise Lavrenz, Denise Pommer, Elsa Diaz Bautista, Janet Zander, John Sauer, Kenneth Munson, LaVerne Jaros, Lea Kitz, Maureen Ryan, Shanna Jensen, Stacy Ellingen, Stephanie Birmingham, Shakita LaGrant, Beth Fields, Michael Bruhn
Date: 1/11/2022	Time Started: 9:30 a.m.	Time Ended: 2:00 p.m.	
Location: Virtual Zoom Meeting			Presiding Officer: Heather Bruemmer

Minutes

Members absent: Audrey Nelson and Darci Knapp

Others present: Brenda Bauer, Carrie Molke, Curtis Cunningham, Kevin Coughlin, Kiva Graves, Krista Willing, Tom Balsley, Karen Timberlake, Lisa Olson, Paula Tran, Jonette Arms, Anna Benton, Kimberly Schindler

Meeting Call to Order, presented by Heather Bruemmer

- Went over meeting processes.
- Introductions of present council members and Department of Health Services (DHS) staff were made
- Approval of November 2021 Meeting Minutes
 - Motion to approve by Dennise Lavrenz. Seconded by Cindy Bentley. Unanimously approved

Division of Medicaid Services (DMS) Updates, presented by Curtis Cunningham

- The telehealth permanent policy has been published in ForwardHealth and will go into effect once the public health emergency is rescinded.
- The Home and Community Based Settings (HCBS) Statewide Transition Plan (STP) was submitted to CMS for approval.
- Electronic Visit Verification (EVV)
 - Hard launch was delayed. CMS would like a new hard launch date and plan soon.
 - DHS looking at what needs to be accomplished to assure a high level of compliance and a fair opportunity for people to enter and use the system.
- Children's Long Term Support Waiver (CLTS)
 - The waiver was approved by CMS with the additional benefits.
 - There are now over 12,000 children on the waiver.
- There will be a lot of pandemic unwinding work. Due to the public health emergency (PHE), we have not been disenrolling individuals. When the PHE ends, we will be required to do eligibility reviews for everyone, including the long-term care functional screen (LTCFS). The goal for DHS is if an individual is found no longer eligible for Medicaid, there is a smooth transition to assure people do not go without health insurance.
- American Rescue Plan Act (ARPA)
 - DHS will have until March 2024 to spend the enhanced funding. DHS website updated today with more information. There will also be a listserv and general mailbox for ARPA related questions.
 - Krista will talk about 5% rate increase this afternoon.
 - Direct care workforce reform will look at career ladders, statewide directory for direct care workers, staff stability survey. Currently reviewing potential surveys and looking into ways to gather responses. Hope to have an initial survey out to providers sometime in 2022.

- Completed review with tribes to look at their HCBS systems and how they would like to use the funding to enhance services for their individual tribes.
- ADRC outreach and education; enhanced marketing and systems for ADRCs.
- Service provider innovation grants – we are getting the administrative structure up and running. May be a great conversation for the next LTCAC meeting. We are considering phasing in the program as we do not have the capacity to process all grants at one time.
- **Council Suggestion:**
 - Future agenda topic - update on the critical incident system to allow sharing between long-term care and adult protective services.

Division of Public Health (DPH) and Division of Medicaid Services (DMS) Administrators Introductions

- New leadership in the Division of Public Health
 - New State Health Officer/Division Administrator- Paula Tran
 - Two new Assistant Division Administrators
 - Jonette Arms
 - Will manage and direct the Bureau of Aging and Disability Resources, Bureau of Communicable Diseases, Bureau of Community Health Promotion, and Bureau of Environmental and Occupational Health.
 - Anna Benton
 - Will manage and direct the Office of Policy and Practice Alignment, Office of Health Informatics, Office of Preparedness and Emergency Healthcare, and the Bureau of Operations.
- New leadership in the Division of Medicaid Services; new Medicaid Director/Division Administrator – Lisa Olson

Address to Council, presented by Karen Timberlake

- Welcomed new council members.
- Reviewed 2022-2023 Charges to the LTCAC
- **Council Suggestion:**
 - As we look at charges, we will need to measure our success. As we move forward, it would be helpful for the council to have metrics to review on a regular basis.
 - Consider future agenda topic on state centers and any plans for closure.

Department of Public Health Updates (DPH), presented by Carrie Molke

- A number of groups (ILCs, ADRCs, aging service providers) have contacted us to express concern with not having adequate resources to support them as they provide services.
 - Looking at impact of workforce on their services also. Much of the aging system is volunteer led and many volunteers stopped volunteering with the pandemic and agencies are having a hard time recruiting them back.
 - DHS is starting conversations with these agencies on how we can assist with the issue.
- **Council Suggestion:**
 - Look at opportunities to connect across multiple state agencies to address because workforce issues affect more than just DHS programs, such as transportation.
 - Consider a strategy such as community conversations to get non-traditional individuals involved. There is collective impact because these services are likely to touch everyone in Wisconsin at some point in their lives.
- COVID-19
 - Continue to see a high number of cases statewide and COVID continues to impact our work.

- 500 people have been deployed to assist with the nearly 300 facilities that made requests for assistance. First wave of National Guard has been deployed to assist skilled nursing facilities. The hope is that more beds can open to relieve stress on acute care and hospitals.
- Health Equity Grants
 - Over 60 organizations applied, 40 grant awards are available.
 - Grant awards will be announced the week of January 17, 2022.
- State Health Improvement Plan (SHIP)
 - The State Health Assessment (SHA) was recently completed, now starting on State Health Improvement Plan.
 - Looking to seek feedback from the aging and disability network. Just starting to flush out process and timeline. Will likely bring to LTCAC in the spring.
- Narrative Training
 - We need a better narrative for advocacy and community work as we know how important community organizing is; especially bring trusted voices from our communities into our work. If we hope to achieve better health equity, we need to get better about our narrative and addressing toxic narratives.
 - Looking to provide narrative training to staff.
 - Will be bringing this topic to the LTCAC for future meetings and discuss if council would like to receive narrative training also.
- Aging Plans
 - The plan process is robust. Plans are for three years and agencies are simultaneously working on their current plan and building one the next one.
 - Historically we have started with the State's plan; then to the aging unit; then to the counties. This time we flipped the process. Counties have completed their plans and have submitted them for review. Area Agencies on Aging have completed their plans, so now DHS is starting work on the State's plan.
 - Should have a draft in March; public comment period likely to be in early May.

Public Comment

- Ramsey Lee
 - Thank you for your work. Would like to get more involved with the council and commitment to equity. How can I get more involved with the long-term care council?
 - Would like to see the state centers close so people can live in their own communities.
 - Appreciate the wage increases for personal care workers, but would like to see a similar increase for supportive home care workers. Everyone is having trouble recruiting caregivers.
- Bob and Heidi Sheire
 - Will the PHE be extended?
 - The council is doing an excellent job – wish I could be part of the committee.
- Jane Bushnell
 - Appreciative of the ARPA funding increases. Agencies did find out about this in late December when many staff were out over the holidays. New authorizations needed to be completed in a short timeframe and we are waiting on them. If a similar initiative occurs in the future, request that DHS work with stakeholders to implement in a doable timeframe.
- Jason Glozier
 - I will be the replacement for Maureen at the Wisconsin Coalition of Independent Living Centers director. I am encouraged by what has been discussed on the call today, especially inclusion. I am excited to work with the council.

- Larry
 - Caregivers need better wages and they also need benefits. Many people give their lives to improve the life of people with disabilities. The money being spent on DHS systems and infrastructure could be spent on additional increases to caregiver rates and benefit packages.

American Rescue Plan Act (ARPA) – 5% Rate Increase, presented by Krista Willing

- Feds allow us to use ARPA funding to have additional funds for HCBS expenses for a period of time
 - January 1, 2022 implementation for most programs. Working with HMOs and MCOs to pass the increase on to providers.
 - Due to self-direction with IRIS program, the implementation is based on conversations with IRIS participants so the roll-out will be longer.
 - The Governor’s budget had separate increases for self-directed personal care workers so the 5% increase is on top of the increase outlined in the budget.
- Press release on increase just went out. The DHS public page has more information including frequently asked questions.
- **Council Suggestions:**
 - When we track Bureau of Labor statistics, costs have gone up by almost 15%. In order for providers to survive and have staff, wages need to increase – so this increase is necessary but is not enough. DHS should consider investing more ARPA funding into caregiver wages and benefits.
 - Some council members are receiving emails about the March 2024 date for spending ARPA HCBS funding. When DHS is looking at developing rates, consider the cost of doing business as part of the need to sustain increases.
 - Hearing of providers closing doors, DHS should conduct a deeper dive of the MCO provider networks to assure they are accurate and offer choice.

American Rescue Plan Act (ARPA) – HCBS Independent Living Pilot, presented by Curtis Cunningham and Carrie Molke

- Under this initiative the Department will utilize ARPA HCBS funding to develop an independent living pilot. The intent of this initiative would be to divert individuals that would eventually be eligible for Medicaid home and community based services and delay entry into publically funded long term care. Diversion could also occur by providing the necessary supports to increase income. This pilot would be evaluated as a proof of concept to determine efficacy and cost effectiveness to determine adopting as part of the Medicaid program. Medicaid federal matching funds along with savings from diversions would demonstrate adding this program is a cost effective addition to the Medicaid program.
- Looking to LTCAC for thoughts on who should be eligible; what services should be provided; how should the program be administered; and any other considerations.
- **Council Suggestions:**
 - This is very exciting and makes sense. Part of it is thinking through getting the word out and reaching these individuals. Benefit package would need to be limited to be self-sustaining; cannot consider providing the entire LTC benefit package. Consider starting with eligibility for people living in their homes with caregivers. May consider benefits and funding for one-time costs vs. ongoing costs.
 - Agree there may be a need to limit the benefit package. Home repairs and home modifications are a huge need. Could consider eligibility for individuals with certain categories of disease/disability (such as diabetes) that we know can lead to greater care needs. Concern for using any type of income guideline for eligibility as income can change at any time.

- This is reminiscent of old Title 20 SHC program. That program funded SHC, transportation and one-time equipment needs. This program was administered by local aging units. Need to consider quick eligibility process to assure people get the help they need when they need it.
- DHS should consider looking to counties and tribal aging unite. These programs already serve people just above the poverty level and see lots of need for home repairs and modifications.
- DHS might want to consider benefits other than items. Sometimes people just need care management for a short time to figure out how to live independently. They might need help reviewing mail, figuring out budgets, etc.
- DHS might want to consider how those in non-licensed congregate settings might get some support as not everyone lives in a traditional home. Maybe a service coordinator to help people in the setting meet their needs.
- Consider using the current system to support/administer this program rather than looking at a new long-term care system to take on this pilot.
- Milwaukee County contacts out to provide some services to people not eligible for long-term care. More information on this program can be shared with DHS.
- Many counties run similar programs, need to think about what would happen to these programs if DHS pilots this program.
- Tribes have similar programs. No income limits, but have limit on funding amount available and only eligible every 4 years.
- Look into CAPABLE program.

Council Business, presented by Heather Bruemmer

- Next meeting March 8, 2022

Adjourn

- Motion to adjourn by Maureen Ryan. Motion seconded by Cindy Bentley. Approved unanimously.

Prepared by: Kimberly Schindler on 1/12/2022.

These minutes are in draft form. They will be presented for approval by the governmental body on: 3/8/2022