

## OPEN MEETING MINUTES

Name of Governmental Body: Wisconsin Long Term Care Advisory Council (WLTCAC)			Attending: Chris Witt, Cindy Bentley, Shanna Jensen, Stacy Ellingen, Beth Swedeen, Elsa Diaz Bautista, LaVerne Jaros, Jason Glozier, Jessica Trudell, Eric Kostrzak, Joel Gouker, Mackenzie Wann, John Schnabl, Sara Muhlbauer, Jennifer Jako, LaWanda Calhoun, Linda Bova, Jill Jacklitz, Don Wigington, Mike Pochowski, Lisa Davidson, Karina Chelsky, Tina Anderson
Date: 9/9/2025	Time Started: 9:32am	Time Ended: 12:30pm	
Location: Virtual Zoom Meeting			Presiding Officer: Jill Jacklitz

### Minutes

**Members absent:** Karina Chelsky, Lisa Davidson, Elsa Diaz Bautista, Jason Glozier, Sara Muhlbauer, Jessica Trudell

**DHS Staff present:** Nicole Schneider, Brenda Bauer, Alicia Boehme, Carrie Molke, John Grothjan, Helen Sampson, Joyce Vue

### Meeting Call to Order – Jill Jacklitz

- The meeting was called to order at 9:31am
- Introduced members
- Review agenda
- Minutes from July meeting reviewed
  - Motion to approve by Lavern Jaros. Seconded by Chris Witt. All approve. Minutes approved.
  - None Abstain.

### General Updates for the Long Term Care Advisory Council – Carrie Molke, Nicole Schneider

- Nicole S. – The Competitive Integrated Employment (CIE) Data was brought up at July’s meeting; there was information provided in the “July 2025 Updates” document; Alicia Boehme is here to share more information again and to answer any questions.
  - Alicia A. – As a reminder, the CIE 2024 data was presented in January 2025; this data includes trends and is also available on our web page at the link below:
    - <https://www.dhs.wisconsin.gov/employment-skills/index.htm>
    - If you search on Google, type in “employment initiatives Wisconsin” and it’ll be one of the first choices that comes up.
    - CIE reports are located on the main webpage, but the direct link to the most recent report is located here: <https://www.dhs.wisconsin.gov/publications/p03634-24.pdf>
    - State 2025 data is not available yet. The 2025 report will build on data to show trends over time.
    - Will come back and present the 2025 CIE Report once it is complete, hopefully in early 2026.
- Nicole S. – Another topic that has been brought up in the past is about Managed Care Organizations (MCOs)
  - In the “September 2025 Updates” document, we have shared information about “Family Care Managed Care Organization Member Advisory Committee Contacts”. Please refer to the document for more information.
- Carrie M. – Share information about two initiatives
  - For both initiatives, leadership was provided by Helen Sampson. A big thanks to Helen.
  - First initiative regarding ARPA projects:
    - There has been an opportunity to make grants available to partners; awarded 37 grants to 32 organizations, 42 counties covered
    - In the process of finishing up a report that outlines all projects and lessons learned; also did some video vignettes; will make sure to present once videos are ready

- From these 37 partners that were awarded, all of them are to utilize a coalition to help them grow; grant itself was only 9-10 months of funding; end of grant period, there were 573 organizations across WI that was included in this coalition; represented 1,000 people; all coalitions agreed that they will continue; in first month of reporting; the grantees reported serving 450 people; at the end of the funding they served 27,651 individuals; huge impact and growth
  - Second initiative is the National Center to Re-frame Aging:
    - Help understand to frame aging and disability; noting that people make a lot of mistakes; simple solutions were being taught; happy to share more information; there are opportunities to participate in introductory sessions;
    - Refer to flyer in attachments for more information; next session is coming up at the end of October and another one in February 2026; also tailored for health professionals; we'd like to share this invitation and hope you participate; if you have questions, please direct them to Helen Sampson at [helen.sampson@dhs.wisconsin.gov](mailto:helen.sampson@dhs.wisconsin.gov)
  - Both initiatives have been talking about Long Path; this lays the foundation for our long path vision that we've done collectively.
- **Council Feedback**
  - Joel G. – Having the MCOs address the council is very different from directing questions to MCO member panels and doesn't seem to be a request from them that is unreasonable.
    - Nicole S. – What would be the purpose and what to address? Our council is here to advise.
    - Joel G. – What would help them best? And what are issues members are facing? Asking what is the state of their side of things? Being able to learn from them in how we can best direct services would be informative.
    - Nicole S. will look into this and see if there's a way to structure this discussion depending on our council's charges

### **Payment Integrity Review (PIR) Update – Tabitha Ramminger**

- Presentation shared with council
- Goal is to give a high-level overview of the Payment Integrity Review tool
- The main focuses are:
  - Providers
  - Members
  - Internal Audit
- PIR Program – reviewing Medicaid claims prior to payment
- Purpose is to safeguard the integrity of the Medicaid program through the proactive review of claims prior to payment and educating Medicaid providers on proper billing practices.
- Goals:
  - Ensure provider claims meet federal and state requirements
  - Support provider compliance through technical assistance
  - Monitor high risk benefit areas
- OIG selects and reviews provider and service specific cases based on the following:
  - Provider Specific Review – Data analysis, case investigation, or other methods indicate risk or presence of aberrant billing from a specific provider
  - Service Specific Review – The same or similar problematic billing behavior is widespread and affects a particular service benefit or procedure code
- Looking ahead:
  - OIG is planning to use PIR to review personal care claims in the future
  - Additional resources are being created to assist providers
  - OIG will issue a benefit-wide communication when resources are ready
- Please help DHS combat program fraud, waste and abuse by reporting suspected concerns to OIG at:
  - Phone: 877-865-3432
  - Online: [www.reportfraud.wisconsin.gov](http://www.reportfraud.wisconsin.gov)
- Providing contact information for future inquiries:

- Tabitha Ramminger, Deputy Inspector General: [tabithaa.ramminger@dhs.wisconsin.gov](mailto:tabithaa.ramminger@dhs.wisconsin.gov)
- **Council Feedback**
  - Helen S. - At the beginning of your presentation you referenced types of claims that are at high risk for fraud, waste and abuse - what are some examples of those?
    - Tabitha R. – There is a national list by CMS; high risk benefits; different care areas for higher risk
  - Linda B. – For the RNs that were evaluating claims, and when this was rolled out, there was disparity between the authorization process; when PIR was up and running, the determinations was based on OIG; there was a lot of disconnect and differences between the two; how is the communication?
    - Tabitha R. – Part of reason, have not relaunched personal benefit yet; What is PA enforcing? What cannot be forced by PA?
  - Linda B. – Is there a timetable of payment that is reviewed? And for partial or full payment? What is that process? These agencies/units are to pay for these agency caregivers; high level of concern; agencies can't support payrolls
    - Tabitha R. – Goal is to be under 30 days; claims right now are processed within 2 days; we recognize the delay is frustrating; have created efficiencies
  - Linda B. – Spam billing; each claim could take an hour of time; need to submit a lot of documentation; seeing and hearing that every single claim needs that bulk of documentation to be uploaded; this takes a lot of time; sometimes there is a lack of ability from the platform to take all the documents; Where are there going to be efficiencies? This process is burdensome for agencies.
    - Tabitha R. – Another feedback that we've heard; working through this; not every PA have the full spread of documentation; real time auto review doesn't require extent of documentation; don't always have preapproval material; seeing plans of care and medical records are changing; plan to roll out to minimize provider burden as much as possible
  - LaWanda C. - Did I miss if the claim were denied is there an appeal process?
    - Tabitha R. – For all claims, should request claim to be re-evaluated.
  - Don W. - What percentage of claims are incorrect and how will you evaluate the effectiveness of the PIR program?
    - Tabitha R. – Percentage varies depending on the tool
    - Nicole S. – We collaborate with Tabitha to see the claims that are coming in; looking to see if this is what the benefit says? Can we write a clearer benefit?
  - Joel G. – Does this review process apply to private duty nursing services with 1099 nurses?
    - Answer is No

### **Long Path Charge: Updates and Input – Helen Sampson**

- At July meeting, presented large part of research.
- Led to the conclusion that it makes sense to put the Multisector Plan for Aging on the back burner.
- A more accessible and easier path is to look at the Age Friendly initiatives already in Wisconsin and to build an age-friendly ecosystem together.
- Spoken with three Age Friendly Public Health leads – Eau Claire, Wauwatosa and Greendale
- Spoke with Marquette and Geriatric Center, backbone organization for Age Friendly Health Systems
- Spoke with two of the three age-friendly universities – UW-Superior and UW-La Crosse
- Happy to announce that UW-Green Bay just received age-friendly designation
- Starting to see dots getting connected and possibilities opening up
- UW-Superior – They have a champion in place; speak to hopes of future; role of accessibility to be digital and to navigate campus; already seeing cool connections happening
- UW-Green Bay – Having a celebration on November 4; Helen will be speaking at this event
- Helen's speech includes reframed language:
  - By becoming a recognized age-friendly university, learning never ends
  - As we age, we have the capacity of ongoing learning and contributing to our community
  - Support full participation of all who loves learning; keeps us all healthier

- What did you hear in this speech? Heard “connection” and “us vs. them”; some of these narrative pieces become very powerful as we build our collaboration and be a more inclusive community
- Where we are at the moment? Everyone is excited/engaged see potential of coming together to be an age-friendly network; invite more participation
- Doodle poll happening; will get together in October with Marquette
- Continuing with training through Center for Reframed Aging; please join the introductory session (refer to flyer in the handouts)
- Other piece we continue to work on is tackling the intersection between aging and disability.
- Resources and certifications have really evolved around aging first; we have to be very intentional to speak to the intersection with disability
- A lot of these designations are at a national level; pushing that people are thinking about the disability and reframing piece
- Regular gathering of aging, disability and independent network; welcomed a professor from Colorado to speak to this intersection of aging and disability
- Helen shared the WI Age and Disability Friendly Ecosystem diagram (refer to handouts)
- We need to work on our state public health age friendly designation
- We don’t have age friendly workplaces and Home and Community-Based Services (HCBS) initiatives (this actually doesn’t exist in the country yet either)
- As we continue to work toward a full ecosystem – What are your thoughts about age-friendly workplaces and becoming more age- and disability-friendly in our home and community-based services?
- **Council Feedback**
  - Chris W. – Feel have done successfully in last 5-10 years; we targeted and hired retirees to be job coaches; encouraged in Dane county; many agencies caught on that this is a great workforce; be interested to know how that certification process work
    - Carrie M. – How do we tell that story better? How to share what we’ve already learned? And identify people?
  - Jill J. – Disability in WI has done a great job with workforce; great resource
  - Beth S. – DOT is doing a lot of work around accessible communities; they might be a good partner? Nearly universal design movement, thinking about marketing; call out strategies where communities can participate

### **Workforce Charge: Updates and Input – Nicole Schneider**

- Presentation shared with council
- Program will stay intact; just shifting incentive payments
- What should we do in this space? What are some next steps?
- Suggest Kevin to give updates on all three short-term goals for next meeting
- **Council Feedback**
  - Chris W. – How long are incentive payments available?
    - Nicole S. – Still hoping to find other funds for payments
  - Linda B. – There were more enhancements going on; expanding workforce searches and what we can do; or have access to workforce demographics; How do we get access to demographics? Promote our types of work to that specific demographic? Home care is very concentrated; How are we able to promote this type of work?
  - Carrie M. – Workforce around dementia; this space is where we’re generally stuck; proposals about expanding; doesn’t go forward until a budget ask; Governor’s task force on caregiving; keep persisting on new strategies; back to caregiver report that we want to look at? Send this out to the group again?
  - Beth S. – All recommendations didn’t get into the report; will need to look at old notes; 16 recommendations but they had to be voted on; ideas included: immigration status, flexibility for worker permits, and others; lots of good ideas
  - Mike P. – Link to official report is: <https://www.dhs.wisconsin.gov/gtfc/index.htm>; another idea was to look at 16- to 17-year-olds to work in assisted living

- LaVerne J. – Look at medium and long-term goals for this charge; we don't have enough workers now; unless we find some way to move toward technology as a substitute or pull more workers in; we're competing with other industries for workers
- Jill J. – Request a couple of people to review and research the report and share with the council at our next meeting. What are the items that need to be elevated to this group? This will be considered homework. Carrie will look into notes from the initial task force on caregiving meeting.
  - Volunteers include:
    - Linda B., Chris W., Kevin C., Stacy E., Carrie M., LaVerne J., Mike P., Beth S., and Lynn G.

### **Medicaid Long-Term Care Charge: Updates and Input – Nicole Schneider, Alicia Boehme**

- Presentation shared with council
- Give an update on what's been happening
  - Review and recommend updates to waiver and contract language
    - Proposed MCO contract language (batch 2) was sent to council on 8/15/25 and comments due on 9/8/25
    - Batch 3 coming out soon; end of this week or early next week
    - All contract language will be finalized by mid-October
  - LTCAC received briefing on IRIS waiver at July meeting
    - IRIS waiver will be submitted this week sometime
  - There is a new Medicaid Advisory Committee (MAC)
    - Link: <https://www.dhs.wisconsin.gov/medicaid/advisory-committee.htm>
    - Will work to establish connections with MAC; once we start we want to learn what they do over there and align our goals
  - The October CARES release will include information about MAPP premiums
- One of the mid-term goals was to recommend a clearer definition of provider network adequacy for Managed Care Organizations (MCOs)
  - MCO Network Adequacy:
    - External Quality Review (EQRO)
    - Department of Health Services (DHS)
- Is this mid-term goal something we as a group would want to pursue?
- What should be our next steps? Any other topics of interest?
- We can look at the other mid-term goals as well to see what the group would like to do
- **Council Feedback**
  - Beth S. – Regarding network adequacy; Does the department or outside evaluator assess wait times? Might involve job development? How challenging is it to get a service if you want it?
    - Alicia B. – Will look into this and bring back to the council
    - Nicole S. – We're waiting from guidance from CMS for some of the rules; this could change slightly
  - Beth S. – An update on this would be appreciated once DHS knows more
  - Chris W. – Is there a reduction in Medicaid eligibility?

### **Federal Budget / Medicaid Update – Bill Hanna**

- Will give an overview of the State budget changes and then Federal budget changes
- Governor Evers signed the state budget on 7/3/25
  - Our cost to continue was over \$1 billion
  - Big change to our hospital tax and programs
  - Wisconsin is in a good position with our state budget and Medicaid program
- Federal changes:
  - Expansion state versus Non-expansion state

- For most of the provisions, Wisconsin is a non-expansion state
- Work Requirements:
  - We do cover a part of population via our BadgerCare Plus Waiver
  - Work Requirements will become effective January 1, 2027 – CMS will not be granting any extensions
  - Who needs to meet requirements?
    - Adults 19 to 64 in WI primarily the population under BadgerCare Plus
  - What will they need to do? They have to prove that they are working 80 hours a month, volunteering 80 hours a month, participating in employment program 80 hours, or enrolled half-time in programs to get to 80 hours a month; there are also exemptions
  - Medically needy – not defined
  - Need to figure out our communications plans
  - We need to train all eligibility staff in time to go-live on 1/1/2027; but CMS is not required to give us the requirements until June 2025
  - We need to start making assumptions
  - What documentation is needed to meet the definition of Medically Needy?
- Not applicable in Wisconsin:
  - We are not planning for 6-month renewals
  - There is a change to retro-eligibility:
    - Example of what is happening now: If they weren't enrolled in Medicaid and ended up in the hospital in August and have medical bills from August; come September, they find out they are eligible for Medicaid; we can see they are eligible in August as well and can back-date to August to cover their bills.
    - Starting 1/1/2027, we're only able to look back two months, rather than the three months happening now.
- What should we do now?
  - Two key messages:
    - 1. Nothing has changed today
    - 2. Please keep your contact information up-to-date; county IM agency; MyAccess App; signing up for text messaging via Access website
- Update on SNAP or FoodShare
  - Big changes to how being administered in federal bill; there are three to four big changes:
    - First – Today, the administration costs of running program, is shared 50/50. Starting in October of 2026, the federal government is cutting their share in half; state will pay 75% and federal will pay 25% of cost. That will cost us over \$40 million a year; to maintain our program as is.
    - Second – Snap benefits; money that goes on EBT cards has been 100% federal dollars; starting in October of 2027, a state may need to contribute a portion of those costs and how much they have to contribute depends on a state's error rate; WI has a low error rate, but not guaranteed and takes a lot of resources; eligibility is really complicated; if error rate goes above 6%, we now have to contribute 5% of benefit cost on people's quest card, which is about \$69 million a year; as error goes up, state pay goes up; asking for legislature for \$11 million to hire more staff for the state and at MILES; when there are changes in the program, the error goes up
    - Third – Work requirements for foodshare recipients; for adults 18 to 54 who have children above the age of 14, they need to meet work requirements or exemptions; this will increase food cost to program which is about \$74 million.
- **Council Feedback**
  - Mike P. – Do you envision any unattended cuts to other programs in Medicaid? Family care program related to assisted living?
    - Bill H. – Financial position for the next two-year budget; we're in a good space; a lot of changes at federal level will be impactful on expansion states

- Beth S. – Keeping information up-to-date, is the department putting together materials on this? This would be helpful to share to our networks. Is there a press kit? Is there a timeframe? People are confused and will see reports from other states.
  - Bill H. – We are planning to build public messages; use same logos and messaging
  - Beth S. – There will be back-channel comments; rumor mill keeps flaming; keep messages on timeframe; reminding who they can go to with questions
- Cindy B. – For some advocates, what if they cannot work 80 hours?
  - Bill H. – Great question; people with disabilities will not need to meet the work requirements; might need to prove that they have a disability
- Cindy B. –With social security, need to follow guidelines too; system is too complex
- Beth S. – What is our current error rate?
  - Bill H. – Calculating the error rate is hard; final error rate will be calculated in June possibly; don't have in-year rate
- Don W. – States can decide if they don't want to pay extra portion?
  - Bill H. – This is a little unclear; Could we decrease benefits and only use federal money? No, we can't do this; either run a FoodShare program or not at all
- Chris W. – For expansion states, would they drop snap and other programs?
  - Bill H. – Don't want to speculate to what other states would do

#### **Council Business – Jill Jacklitz**

- Requested topics for November
  - Updates from Charges – Long Path, Workforce, and Medicaid Long Term Care
  - Have a quarterly update about the Federal/State Budget and Medicaid
  - Jennifer J. – The ForwardHealth enrollment, are we hearing concerns by providers about enrolling by deadline? Do we need information where we're at as a state?

#### **Public Comment – Jill Jacklitz**

- Melissa S. – Own agency; thank you for bringing OIG to speak on PIR; heavily involved with PIR audits; want to throw caution out there; issues with providers are an entirely different landscape; not just about the wrong service code; not actually happening in the PIR audit world; please keep communication open
- Ramsey L. – Thank you for the hard work of this committee; concerned about the new IRIS provider management system; people in family care are very concerned that new provider management system will substantially decrease the provider pool for people; wondering if we can work with state and federal partners to provide implementation of system for IRIS

#### **Adjourn**

Motion to adjourn by Don W.; seconded by Tina A.

Meeting adjourned at 12:34 pm

Prepared by: Joyce Vue on 9/9/2025.

These minutes are in draft form. They will be presented for approval by the governmental body on: 11/11/2025