



WISCONSIN DEPARTMENT  
*of* HEALTH SERVICES

# Recommendations from Ad Hoc Groups Regarding LTCAC Charges

Tuesday, May 13, 2025



# Guidelines For Ad Hoc Groups

- Any changes to the “New Suggested Charge” language?
- Any recommendations on what areas to focus on for this specific charge? What are some short-term, mid-term, and long-term recommendations?
  - For example, for short-term, what could be priority areas in 2025?
  - For mid-term, what could be priority areas over the next year or two?
  - For long-term, what could be priority areas over the next 5 to 10 years?



# Charge #1 – Long Path

OLD CHARGE	NEW SUGGESTED CHARGE	AD HOC SUGGESTION
<p>Planning and problem-solving strategy looking ahead 10, 15, 25, and 100 years. Develop a collaborative and innovative strategic plan visualizing a future based on shared values and beliefs on what Wisconsin's long-term care system will look like.</p>	<p>Provide input into the process that could be used to develop a ten-year multi-sectoral plan on aging and disability (MPA-D) that is designed to create a coordinated system of care and support services that promote healthy aging, independent living and social engagement, while also addressing issues related to social determinants of health.</p>	<p>Recommend strategies and participants to develop a 10 to 30-year multi-sectoral plan on aging and disability (MPA-D) to strengthen a coordinated system of care and support services based on the following:</p> <ul style="list-style-type: none"><li>• Consumer choice and independent living</li><li>• Healthy aging</li><li>• Age and disability friendly systems</li><li>• Livable communities</li><li>• Social engagement and social determinants of health</li></ul>



# Long Path Recommendations

## ▪ **Short-Term Goal (2025)**

- Identify resources including personnel needs, partnerships, etc.
- Gather and review current information that exists within the state and country (DOT, WHEDA, local reports, etc.)
- Identify barriers to independent living to be included in the MPA-D



# Long Path Recommendations

## ■ Mid-Term Goals (1-2 Years)

- Develop buy-in from Governor's Office, legislators, and agencies.
- Continue gathering and reviewing existing models, strategies and information within the state and country (DOT, WHEDA, local reports, Age-Friendly, MPA Partners, etc.)
- Develop the planning committee and structure for engaging the public



# Long Path Recommendations

- **Long-Term Goals (5-10 Years)**

- Advise and Coordinate with MPA-D
- Reviewing recommendations, assessing feasibility and adopting a plan.



# Charge #2 – Medicaid Long-Term Care

OLD CHARGE	NEW SUGGESTED CHARGE	AD HOC SUGGESTION
<p>Explore strategies to ensure Wisconsin’s Long-Term Care (LTC) programs focus on the whole person including access; choice; high-quality; collaborative relationships; efficient and cost effective; with Wisconsin leading the nation in LTC delivery and services and supports.</p>	<p>Provide recommendations regarding ways to strengthen Wisconsin’s Medicaid long-term care programs, emphasizing equity, inclusion, and a sense of belonging. This should involve meaningful input from people with lived experience. Our collective goal is to have a Medicaid LTC system that leads the nation in providing equitable access, choice, and high-quality care while being efficient and cost-effective.</p>	<p>Recommend ways to make Wisconsin's Medicaid long-term care programs better. Make sure everyone feels included and their voices are heard. The goal is to have an efficient system that gives everyone fair access, choices, and quality care.</p>



# Medicaid Long-Term Care Recommendations

## ■ **Short-Term Goal (2025)**

### ○ **Program Authority & Contracts**

- Review and recommend updates to waiver and contract language

### ○ **Program Transparency & Education**

- Continue to provide insight into and updates on the IRIS algorithm and the impact it has on IRIS participants
- Create a connection with the newly established Medicaid Member Experience Committee to align and maximize efforts



# Medicaid Long-Term Care Recommendations

- **Short-Term Goal (2025) Continued**

- Program Sustainability

- Advise on any decisions/impacts related to Medicaid funding reductions or changes to eligibility requirements



# Medicaid Long-Term Care Recommendations

## ■ Mid-Term Goals (1-2 Years)

### ○ Program Authority & Contracts

- Review and recommend updates to waiver and contract language
- Explore and recommend innovative solutions, including technology
- Recommend a clearer definition of provider network adequacy for Managed Care Organizations



# Medicaid Long-Term Care Recommendations

## ■ Mid-Term Goals (1-2 Years) Continued

### ○ Program Transparency & Education

- Enhance transparency, simplicity, and education across all programs to ensure people can fully understand and access all aspects of the programs
- Ensure simplified, efficient, user-friendly services and clear education about those services
- Explore and recommend solutions that ease the transition between child and adult services
- Provide recommendations that support people transitioning from their parent's insurance into Medicaid
- Maximize an individual's access into their own long-term care records, and facilitate their ability to manage their own supports through end-user portals



# Medicaid Long-Term Care Recommendations

## ■ Mid-Term Goals (1-2 Years) Continued

### ○ Program Sustainability

- Advise on any decisions/impacts related to Medicaid funding reductions or changes to eligibility requirements
- Review and recommend updates to waiver and contract language
- Discuss and recommend innovative ideas, including possible technology solutions to solve problems. Coordinate with other agencies and committees to maximize impact
- Explore and recommend ideas for supporting the critically important family and unpaid caregivers in WI



# Medicaid Long-Term Care Recommendations

## ■ Mid-Term Goals (1-2 Years) Continued

### ○ Addressing an Aging Demographic

- Ensure options, including non-institutional and home-based options are available to older adults
- Recommend approaches to ensure people remain in least-restrictive environments

### ○ Long Term Care Functional Screen

- Explore and consider options for a new/improved functional eligibility tool that accurately aligns level of care and needed support



# Medicaid Long-Term Care Recommendations

## ■ Long-Term Goals (5-10 Years)

### ○ Program Authority & Contracts

- Review and recommend updates to waiver and contract language
- Transition to one plan for all aspects of an individual's care, regardless of setting or services received. Would need to consider regulatory requirements for various services, but would make it simpler for people to manage everything in one place



# Medicaid Long-Term Care Recommendations

## ■ Long-Term Goals (5-10 Years) Continued

### ○ Program Transparency & Education

- Continue improvement of transitions between children and adult services

### ○ Program Sustainability

- Advise on overall long-term care provider capacity for all covered services to ensure eligible people are able to access care
- Explore and recommend ideas for supporting the critically important family and unpaid caregivers in WI



# Medicaid Long-Term Care Recommendations

- **Long-Term Goals (5-10 Years) Continued**

- Addressing an Aging Demographic

- Recommend approaches to ensure affordable, accessible, available housing, including collaborations with city governments



# Charge #3 – Workforce

OLD CHARGE	NEW SUGGESTED CHARGE	AD HOC SUGGESTION
<p>Develop recommendations to support and strengthen the direct care workforce, both paid and unpaid, to ensure access to care, improve the quality of caregiving, and meet the growing demand for long-term care services in Wisconsin.</p>	<p>Develop recommendations to support and strengthen the direct care workforce, including both paid and unpaid caregivers, to ensure that everyone in Wisconsin receives quality care that respects their cultural and linguistic needs and meets the increasing demand for LTC services.</p>	<p>Develop recommendations to support, enhance and grow Wisconsin's direct care workforce to meet the demand for both paid and unpaid quality long-term care services. Ensure that all individuals receive respectful, high-quality care where and how they choose and in a manner that is responsive to their cultural, linguistic, and communication needs.</p>



# Workforce Recommendations

## ■ Short-Term Goals (2025)

### ○ 1. Policy & Funding Advocacy

- Goal: Secure sustainable investment and legislative support for workforce initiatives.
  - The Long Term Care Advisory Council (LTCAC) will support the Governor's 2025–27 biennial budget, which includes critical funding for all direct care workforce initiatives.
  - Align all workforce activities with budget priorities to ensure long-term support and measurable impact.



# Workforce Recommendations

## ▪ Short-Term Goals (2025)

### ○ 2. Recruitment & Career Awareness

- Goal: Attract new talent into the direct care workforce through educational pipelines and targeted outreach.
  - Expand and build upon the WisCaregiver Careers High School, Tech College and University initiative, making it a statewide model for early-career engagement.
  - Engage underrepresented populations, including refugees and immigrants, through community outreach and awareness campaigns.



# Workforce Recommendations

## ■ Short-Term Goals (2025)

### ○ 3. Workforce Support & Retention

- Goal: Improve job satisfaction and stability for current care workers.
  - Implement emergency retention bonuses and wage stabilization programs to retain existing direct care workers (DCWs and PCWs).
  - Expand access to mental health and well-being supports tailored for care workers.



# Workforce Recommendations

## ■ Mid-Term Goals (1-2 Years)

### ○ 1. Policy, Infrastructure & Advocacy

- Goal: Strengthen systemic support for long-term workforce stability and recognition.
  - Align wages with regional living wages to improve retention and attract new workers.
  - Prepare a comprehensive 2027–29 DHS budget request that includes long-term workforce development strategies.



# Workforce Recommendations

## ■ Mid-Term Goals (1-2 Years)

### ○ 2. Recruitment & Inclusion

- Goal: Broaden and diversify the workforce by engaging underserved communities.
  - Partner with refugee and immigrant organizations to recruit new caregivers.
  - Promote community-centered recruitment with input from families, participants, and diverse local voices.



# Workforce Recommendations

## ■ Mid-Term Goals (1-2 Years)

### ○ 3. WisCaregiver CDCP & Program Integration

- Goal: Expand awareness, training, and certification through unified statewide initiatives.
  - LTCAC will partner with DHS to promote, improve and support WisCaregiver Careers, Certified Direct Care Professional (CDCP), and WisCaregiver Connections (job matching platform).



# Workforce Recommendations

## ■ Mid-Term Goals (1-2 Years) Continued

### ○ 3. WisCaregiver CDCP & Program Integration

- **Support:** Offer help desk, job placement, and advancement opportunities.
- **Enhance:** Improve participant and employer experience, collaboration with MCOs, ICAs and other agencies. Currently CDCP certification meets national and state-recognized standards (WIOA, DPI, DQA, DMS).
- **Grow:** Recruit and certify 2,500+ workers/year via a robust marketing campaign, awareness effort with self-advocates, agencies, high schools, universities, advocates, academics and networking.
- **Where They Choose:** Include modules on empowerment, advocacy, and community inclusion.
- **Cultural/Linguistic/Communication:** Offer full CDCP experience in Spanish, Hmong, and refugee languages. Includes VR modules, inclusive materials, and proctored exams.



# Workforce Recommendations

## ▪ Long-Term Goals (5-10 Years)

### ○ 1. Integrated Care Systems & Workforce Connectivity

- Goal: Build a unified statewide infrastructure to support seamless communication, credentialing, and workforce mobility. Expand WisCaregiver Careers to include all LTC participants, facilities and providers in the same system.
  - Create a universal LTC workforce and care coordination platform where caregivers, facilities, and participants across all programs can connect, share job postings, and deploy staff countywide.
  - Establish credentialing systems by county, allowing staff to work across programs regardless of employer or benefit structure.



# Workforce Recommendations

## ▪ Long-Term Goals (5-10 Years)

### ○ 2. Sustainable Workforce Support

- Goal: Ensure long-term stability and professional viability of direct care careers.
  - Establish sustainable funding models to support wages, benefits, and retirement plans for DCWs and PCWs.
  - Support care worker-owned cooperatives and agencies to empower workers and improve local control.



# Workforce Recommendations

## ▪ Long-Term Goals (5-10 Years)

### ○ 3. Innovative, Inclusive Community-Based Care

- Goal: Expand and elevate home and community-based care through innovation and access.
  - Promote smart home care innovations, including remote monitoring and user-directed technology.
  - Build resident-owned community health co-ops, offering holistic care, wellness education, and telehealth with local control.



# Group Discussion/Next Steps



# Thank you!

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the people of Wisconsin



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# Adult Long-Term Care Provider Enrollment

RaeAnn Fahey

Program Participation Oversight Manager – BQO

May 13, 2025



# Agenda

- Project overview
- Responsibilities
- Enrollment progress
- Provider support





# Project overview



# About the new system

- The system will allow home and community-based services (HCBS) providers to complete an enrollment application and become certified with Wisconsin Medicaid through the ForwardHealth Portal.
- After becoming certified with Wisconsin Medicaid, HCBS providers will be able to onboard with IRIS FEAs, be authorized for services by ICAs, and contract with MCOs.





# Who is affected?

## Adult LTC programs

- Family Care
- IRIS (Include, Respect, I Self-Direct)
- Family Care Partnership
- Program of All Inclusive Care for the Elderly (PACE)

## HCBS Providers

- Organizations/agencies
- Sole proprietors
- Individual providers
- Tribal providers
- All IRIS vendors



# Who is not affected?

**Participant-hired workers (PHWs)** and **individual self-directed support (SDS) workers** will receive Wisconsin Medicaid IDs through a system data transfer. They will not self-enroll through ForwardHealth.



# Why the change?

## Opportunity



Centralization and automation



Standardization of provider vetting



Data management and reporting enhancement



Efficiency gains

## Compliance



CMS Managed Care Rule



21<sup>st</sup> Century Cures Act



Affordable Care Act



# Benefits and goals

- Online provider directory:
  - Most HCBS providers will be listed in the public-facing ForwardHealth Provider Directory.
  - Participants, members, MCOs, ICAs, and FEAs can easily search for providers by name, county and service.
- Streamline the Medicaid certification process:
  - HCBS providers will only supply credentials once, directly to DHS rather than to multiple MCOs and IRIS FEAs.



# New Enrollment Process

High-level view of the future enrollment process for organizations and agencies, sole proprietors, Tribal providers, and individuals who are not SDS workers or PHWs.



# Enrollment timeline



Sep. 2024	August 2025	Oct. – Dec. 2025	Jan 1, 2026
<b>Application available</b>	<b>Supportive home care provider organization application opens</b>	<b>Catch-up</b>	<b>Enrollment deadline</b>
ForwardHealth began accepting adult LTC provider applications	ForwardHealth begins accepting applications from these providers	Ensure providers who need additional assistance are enrolled	Providers <b>must</b> be enrolled with Medicaid through ForwardHealth to be authorized and reimbursed for services



# What if a HCBS provider does not complete ForwardHealth enrollment?

- **IRIS:**

- Authorizations will be end dated.
- FEA cannot pay the provider for services until ForwardHealth application is completed and enrollment is approved.

- **Family Care, Family Care Partnership, and PACE:**

- MCOs cannot pay provider for services with Medicaid funding until ForwardHealth application is completed and enrollment is approved.
-



# Responsibilities

# Responsibilities

Who?	Responsibilities
HCBS Providers	<ul style="list-style-type: none"> <li>• Access the enrollment application via ForwardHealth.</li> <li>• Complete enrollment by January 1, 2026.</li> <li>• Keep demographic information up to date.</li> </ul>
IRIS FEAs	<ul style="list-style-type: none"> <li>• Share information with vendors to make sure they enroll by January 1, 2026.</li> <li>• Verify a vendor is enrolled prior to onboarding and reimbursing for services.</li> <li>• Option to act as a Third Party Delegate for providers.</li> <li>• Continue to perform onboarding activities for PHWs, including background checks.</li> </ul>
MCOs	<ul style="list-style-type: none"> <li>• Share information with providers in their networks to ensure they enroll by January 1, 2026.</li> <li>• Verify a provider is enrolled prior to contracting and authorizing for services – Medicaid Provider Extract file.</li> <li>• Option to act as a Third Party Delegate for providers.</li> <li>• Submit MCO Network File (via SFTP) monthly – starting later 2025</li> <li>• Continue to perform certification activities for individual SDS workers.</li> <li>• Submit SDS worker information to DHS.</li> </ul>

# Responsibilities, continued

Who?	Responsibilities
ICAs	<ul style="list-style-type: none"><li>• Must share information with IRIS participants so they know what's happening and are empowered to talk with their vendors about the requirement.</li><li>• Ensure the vendor is enrolled prior to authorizing services – WISITS</li></ul>
DHS	<ul style="list-style-type: none"><li>• Train vendors on use of enrollment system.</li><li>• Answer vendor enrollment questions.</li><li>• Review and approve vendor applications.</li><li>• Provide list of vendors who have completed enrollment through ForwardHealth to WISITS (daily).</li></ul>
IRIS participants	<ul style="list-style-type: none"><li>• Should make sure their providers and vendors know about the enrollment requirement using the <a href="#">IRIS participant toolkit</a>.</li></ul>

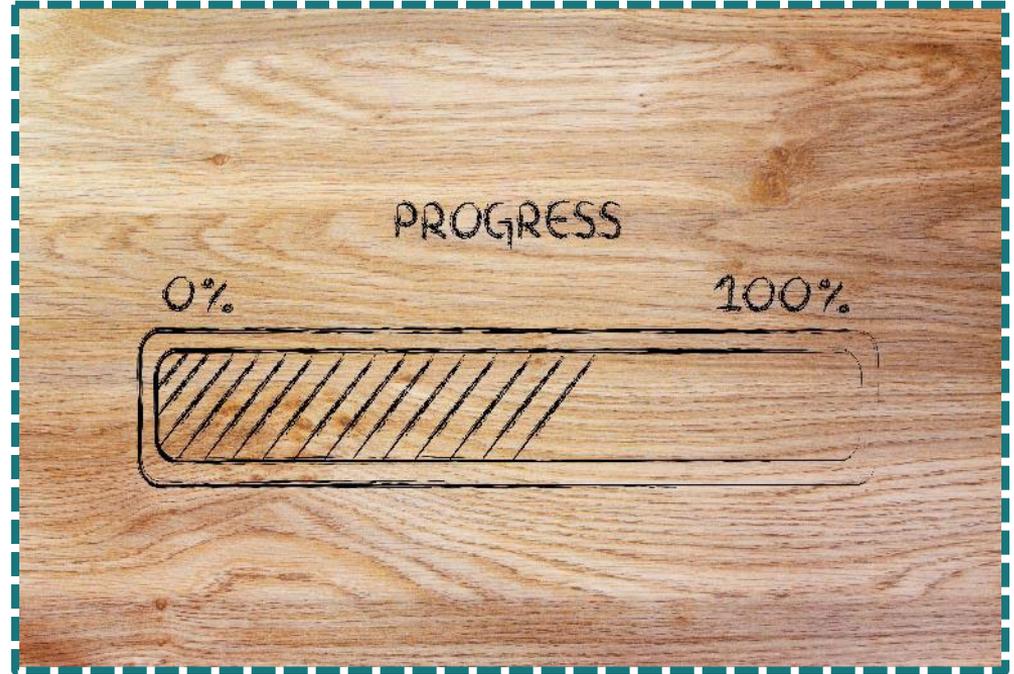


# Enrollment progress



# How many providers have enrolled?

So far, 1,270 providers have completed the ForwardHealth application and been approved.





# Provider Support

Resources to help providers enroll



# Provider Services Call Center

- Call Provider Services at 800-947-9627 if you have more questions or need help. Representatives are available Monday–Friday, 7 a.m.–6 p.m. Central time.
- When providers call, they should say, “LTC Waiver” at the menu prompt to speak with a representative about LTC provider enrollment.





# Provider Enrollment Email

- Team at DHS available to answer HCBS provider enrollment related questions and assist providers through the application.
- [ltpvidererollment@dhs.wisconsin.gov](mailto:ltpvidererollment@dhs.wisconsin.gov)





# Portal information page



[www.forwardhealth.wi.gov/  
WIPortal/cms/public/ltc/  
provider\\_enrollment.htm](http://www.forwardhealth.wi.gov/WIPortal/cms/public/ltc/provider_enrollment.htm)



# Flyer

## Your Wisconsin Medicaid provider enrollment application is waiting

*Don't fall behind—spring ahead!*

You provide home and community-based services under one of Wisconsin's adult long-term care waiver programs. That means you need to enroll with Wisconsin Medicaid through the ForwardHealth Portal. The deadline is January 1, 2026.



### Reap the benefits

Enrolling now gets you listed in the public-facing ForwardHealth Provider Directory, once you contract with a managed care organization or IRIS participant. You can easily choose the services you want to deliver, and the programs relevant to you.

### Get connected

You can get notifications sent right to your email. Sign up for the **Adult LTC Waiver Provider email list** at [www.forwardhealth.wi.gov/WIPortal/Subsystem/KW/Subscriptions.aspx](http://www.forwardhealth.wi.gov/WIPortal/Subsystem/KW/Subscriptions.aspx).

### Get ahead—start now

Start your enrollment now so you don't have to worry about it later this year. Give yourself more than enough time to gather materials, start an application, and get approved.

Others say, "it's such an easy process!"

### Enroll today

1. Learn about the requirement and find key resources: [forwardhealth.wi.gov/WIPortal/cms/public/ltc/provider\\_enrollment.htm](http://forwardhealth.wi.gov/WIPortal/cms/public/ltc/provider_enrollment.htm)



2. Start your enrollment application: [forwardhealth.wi.gov/WIPortal/Subsystem/Certification/EnrollmentCriteria.aspx](http://forwardhealth.wi.gov/WIPortal/Subsystem/Certification/EnrollmentCriteria.aspx)

[Link to Enrollment Flyer](#)



# Provider enrollment checklist

  
**Provider Checklist**  
**Adult Long-Term Care Enrollment**

Ready to start the process of becoming a Medicaid-enrolled adult long-term care (LTC) provider?

Adult LTC providers who deliver home and community-based services (HCBS) may use this checklist to enroll with Wisconsin Medicaid on the ForwardHealth Portal (the Portal) at [forwardhealth.wi.gov](https://forwardhealth.wi.gov). We'll guide you every step of the way.

**Reminders:**

- 1** The enrollment deadline is **January 1, 2026**. Applications may take up to 60 days to process. We encourage you to apply early.
- 2** If you are a residential provider or provider of services at a fixed-site facility, you must enroll with Wisconsin Medicaid and receive a unique Medicaid ID for each physical location. Refer to the ForwardHealth Online Handbook at [forwardhealth.wi.gov/WIPortal/Subsystem/KW/Display.aspx](https://forwardhealth.wi.gov/WIPortal/Subsystem/KW/Display.aspx), scroll down the page and accept the licensing agreement, and search for topic #23490, Enrollment by Physical Service Location, for a list of fixed-site facilities.

[Link to checklist](#)



# Online Handbook

[Hide Table of Contents](#)

Select an Online Handbook

Choose a program:

- Choose a program:
- BadgerCare Plus and Medicaid
- Family Care
- Family Care Partnership
- IRIS
- PACE
- WCDP-Adult Cystic Fibrosis
- WCDP-Chronic Renal Disease
- WCDP-Hemophilia Home Care
- Wisconsin AIDS Drug Assistance Program
- Wisconsin Well Woman Program

[Search Tips](#)

Search within the options selected above

Search all handbooks, programs and service areas

Search by topic number

## Providers

To begin using the Online Handbooks

- Select a value from the user type located on the upper left side of
- Once you select the minimum in required, a list of sections and c appear.
- Within each chapter, you can sel topic to view.
- Once you select a topic, the data content. Each topic is assigned a displayed above the topic title, fo topic number may be entered int and the Advanced Search tools t corresponding topic. Topic numb

[www.forwardhealth.wi.gov/WIPortal/Subsystem/KW/Display.aspx?ia=1&p=&sa=](http://www.forwardhealth.wi.gov/WIPortal/Subsystem/KW/Display.aspx?ia=1&p=&sa=)



# How can you help?

- Spread the word to HCBS providers!
- Remind providers to complete the application as soon as possible!
- Share enrollment resources available to HCBS providers!





# Questions and Answers





# Thank you!

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# Long Term Care Advisory Council Charter

Nicole Schneider, Assistant Administrator of Benefits & Service Delivery

Carrie Molke, Director, Bureau of Aging and Disability Resources

May 13, 2025

# Purpose



- Formal document that establishes the purpose, structure, and rights of the Council.
- Update the current Charter to better:
  - define the objectives, membership, decision-making processes, meeting schedules, and
  - define the roles/responsibilities of a council, and
  - ensuring clarity, alignment with Secretary charges, and effective operation.

# Process



- Researched and reviewed other Wisconsin boards and councils Charters.
- Researched and reviewed relevant Wisconsin state law provisions.
- Reviewed past decision making.
- Decision made to create a new Charter modeling after the Governor's Committee for People with Disabilities bi-laws.

# Composition



- Members of the Council include long-term care advocates, self-advocates or people with lived experience, caregivers, providers, partners and contractors and experts.
- DMS and DPH serve as non-voting, ex-officio members.
- Not more than 21 voting members
  - One from each of the 5 organizations (BOALTC; DRW; BPDD, WCILC; ADPAW)
  - 16 self-advocates, people with lived experience, caregivers, providers, partners and contractors, and experts who represent older adults and all disabilities.

# Term of Service



- Serve at the pleasure of the DHS Secretary.
- The five identified organizations will recommend a member from their organization to hold a seat on the council without term limits.
- The 16 appointed Individuals will be appointed for 4-year terms.

# Meetings



- Members expected to regularly attend every other month council meetings.
- The LTCAC is responsible for providing advice regarding the provision of Long-Term Care services in Wisconsin in accordance with the current charges of the Council.
- At the end of each meeting, the Council will propose agenda items for future meetings.
- Minutes of all meetings shall be provided to the members as soon as reasonably possible following the conclusion of each meeting.
- All bi-monthly meetings of the LTCAC shall be governed by the appropriate provisions of Chapter 19 of the Wisconsin Statutes and Wisconsin's Open Meetings Law.

# Officers



- The officers of the LTCAC shall include a Chairperson or Vice-Chairperson.
- Officers shall serve a term of four (4) calendar years and shall take office immediately at the next LTCAC meeting after their appointment.
- Charter includes the officer duties and responsibilities.

# Committees



- The LTCAC, through its chairperson(s), may establish ad-hoc gatherings as deemed essential to fulfilling the LTCAC charges.
- All ad-hoc gatherings shall regularly report to the LTCAC on all activities of the ad-hoc gathering to the full council for approval and further discussion.

# Charges



- Every two years the DHS Secretary issues charges for the LTCAC to provide advice and guidance to DHS on critical topics related to older adults, people with disabilities and long-term care services and supports.
- Members of the LTCAC provide advice and make recommendations to the DHS Secretary regarding long-term care policy, programs, and services.
- The current charges are listed on the website.

# Intro to Age Friendly Network and Livable Communities



- Programs, resources, advocacy and support
- National, state and local
- 36 million members
- 2,000 employees



**Dr. Ethel Percy Andrus**

# What is a Livable Community?

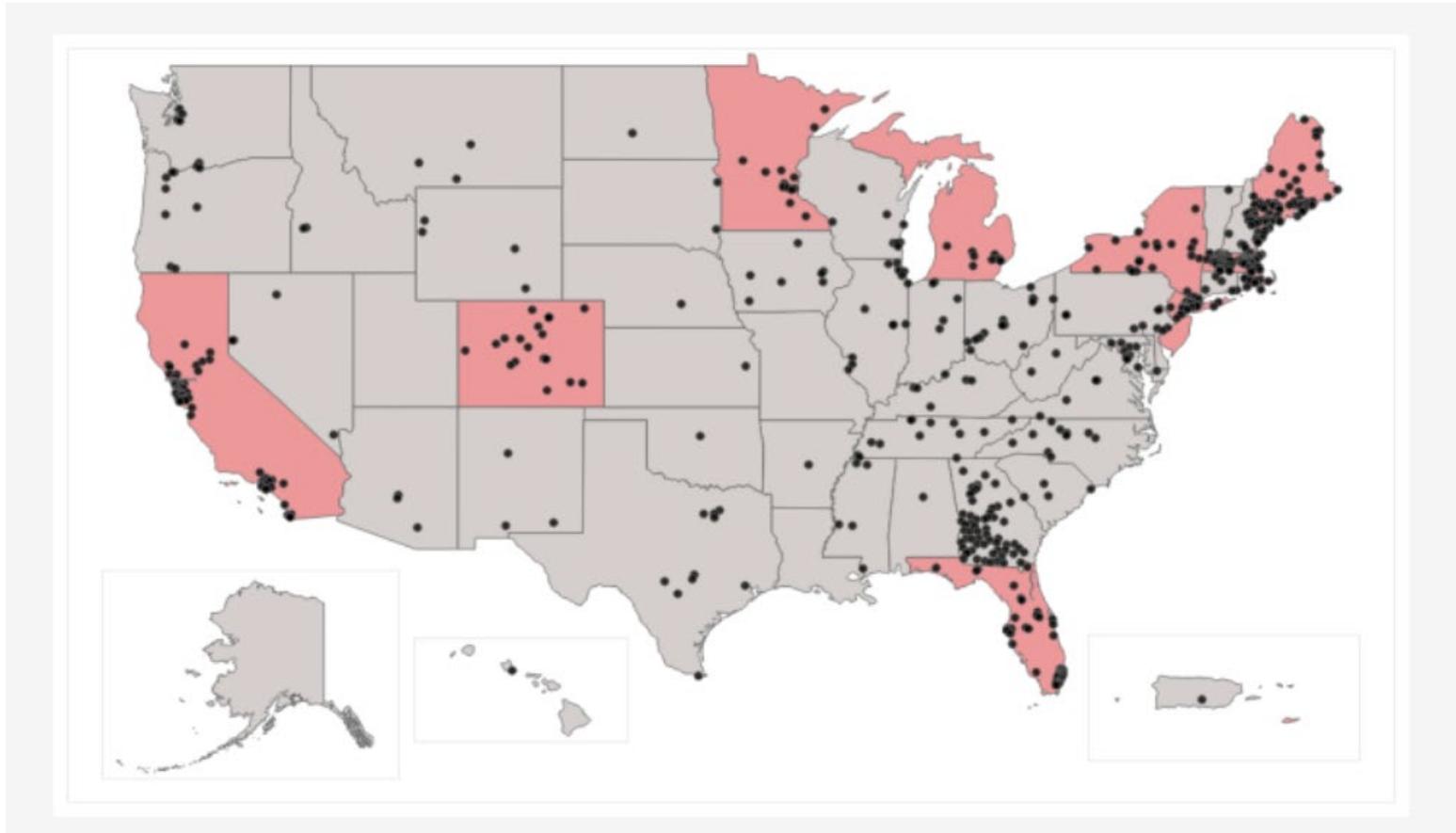
A livable community is one that is safe and secure. It offers choices in where to live and how to get around. And it equitably serves residents of all ages, ability levels, incomes, races, ethnicities, and other backgrounds.



# Background of AFN/Livable

- Established in April 2012
- Macon-Bibb, Georgia, became the first community to join in 2012
- Affiliate of the World Health Organization (WHO) Global Network for Age-Friendly Cities and Communities
- Age Friendly Wisconsin – 2019/2020

# AARP Network of Age-Friendly States and Communities

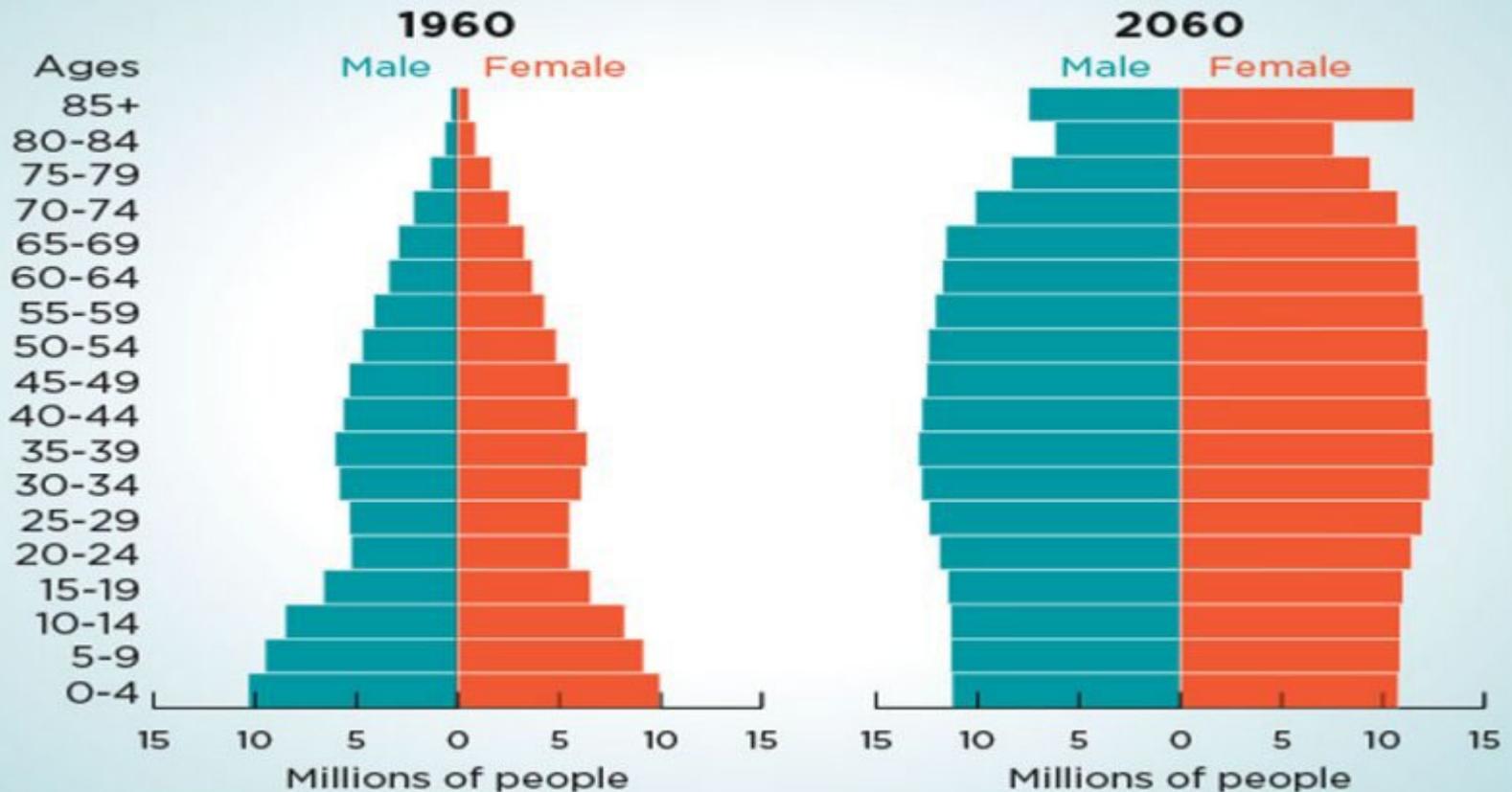


**Over 1,000 Communities**

# The Population of Older Adults is Getting Larger — and Older

## A Century of Change

Population of the United States





Survey after survey finds that today's older adults want to stay in their community

**77%**

of adults ages 50+ agree or strongly agree with the statement: "What I'd really like to do is stay in my current community for as long as possible."

For the past 50 years, communities have developed around cars and other motor vehicles as our **principal form of transportation**

# PEOPLE WANT LIVABLE COMMUNITIES



**Boomers** and **Millennials** have similar preferences for walkable, mixed-use neighborhoods.

72%

54%

Want to be near shops, restaurants and offices

62%

49%

Would move into a smaller home for a shorter commute

42%

59%

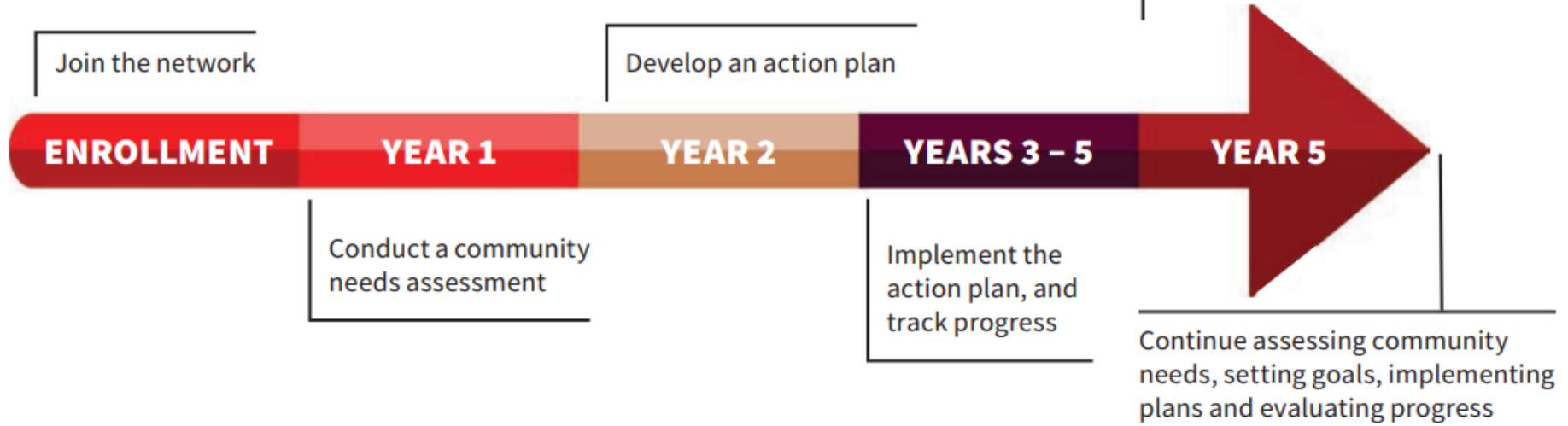
Prefer to live where there's a mix of homes

52%

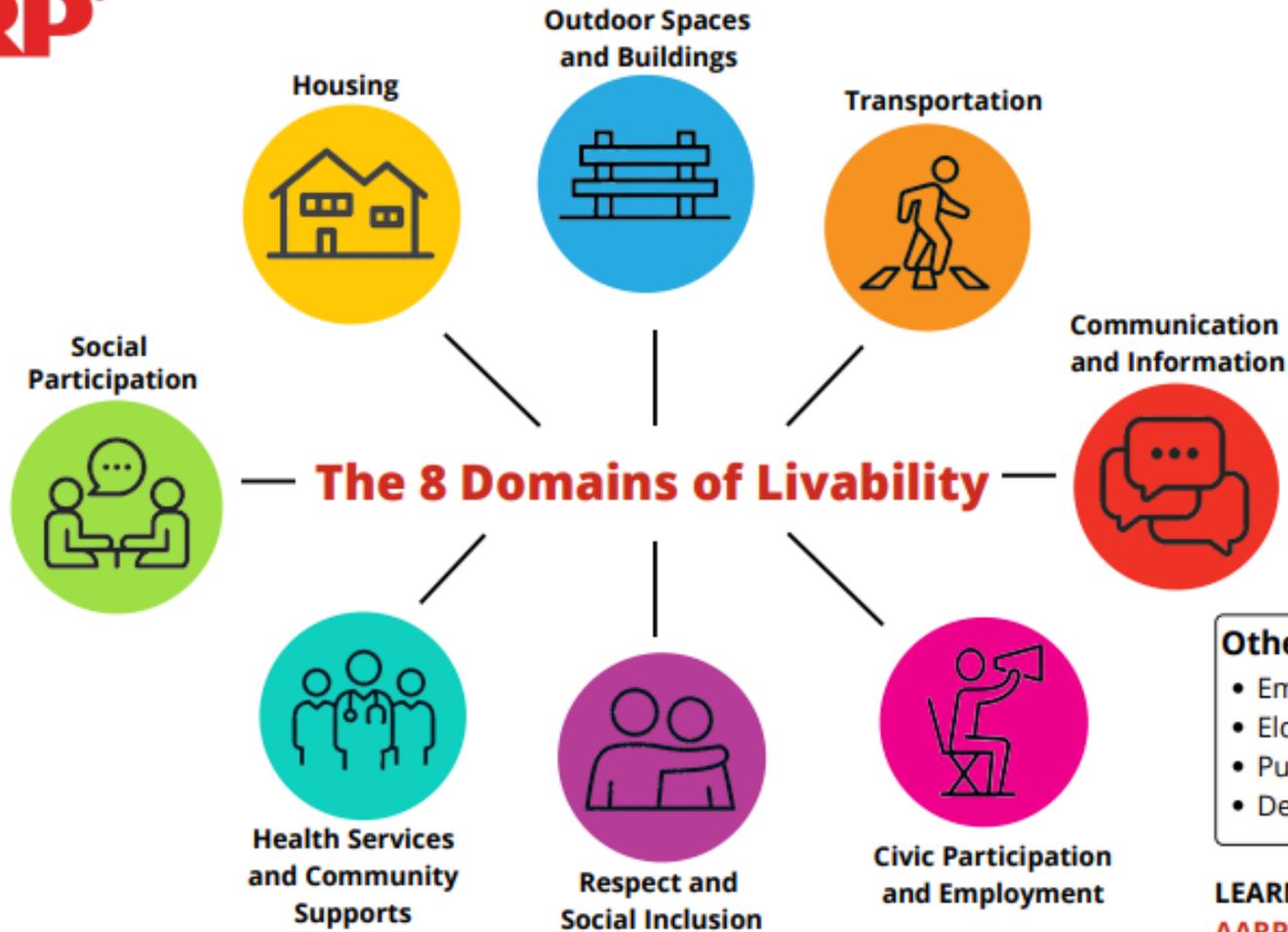
55%

Want public transportation options

## The Age-Friendly Program Process



# The 8 Domains



- Other Areas**
- Emergency Preparedness
  - Elder abuse
  - Public safety
  - Dementia-friendly

**LEARN MORE**  
[AARP.org/Livable](https://www.aarp.org/Livable)

# 1. Outdoor Space & Buildings



People need public places to gather — indoors and out.

Green spaces, safe streets, sidewalks, outdoor seating and accessible buildings (think elevators, stairs with railings, etc.) can be used and enjoyed by people of all ages.

## 2. Transportation



Driving shouldn't be the only way to get around. Public transit options can be as expansive and as infrastructure dependent as a train system or as targeted as a taxi service that provides non-drivers with rides to and from a doctor's office.

# 3. Housing



We find that older adults want to stay in their homes and communities for as long as possible. Doing so *is* possible if a house is designed or modified for aging in place and if a community includes housing options for varying life stages

## 4. Social Participation



Regardless of a person's age, loneliness is often as debilitating a health condition as having a chronic illness or disease. Sadness and isolation can be combatted by the availability of accessible, affordable and fun social activities.

# 5. Respect & Social Inclusion



Everyone wants to feel valued.

Intergenerational activities are a great way for young and old to learn from one another, honor what each has to offer and, at the same time, feel good about themselves.

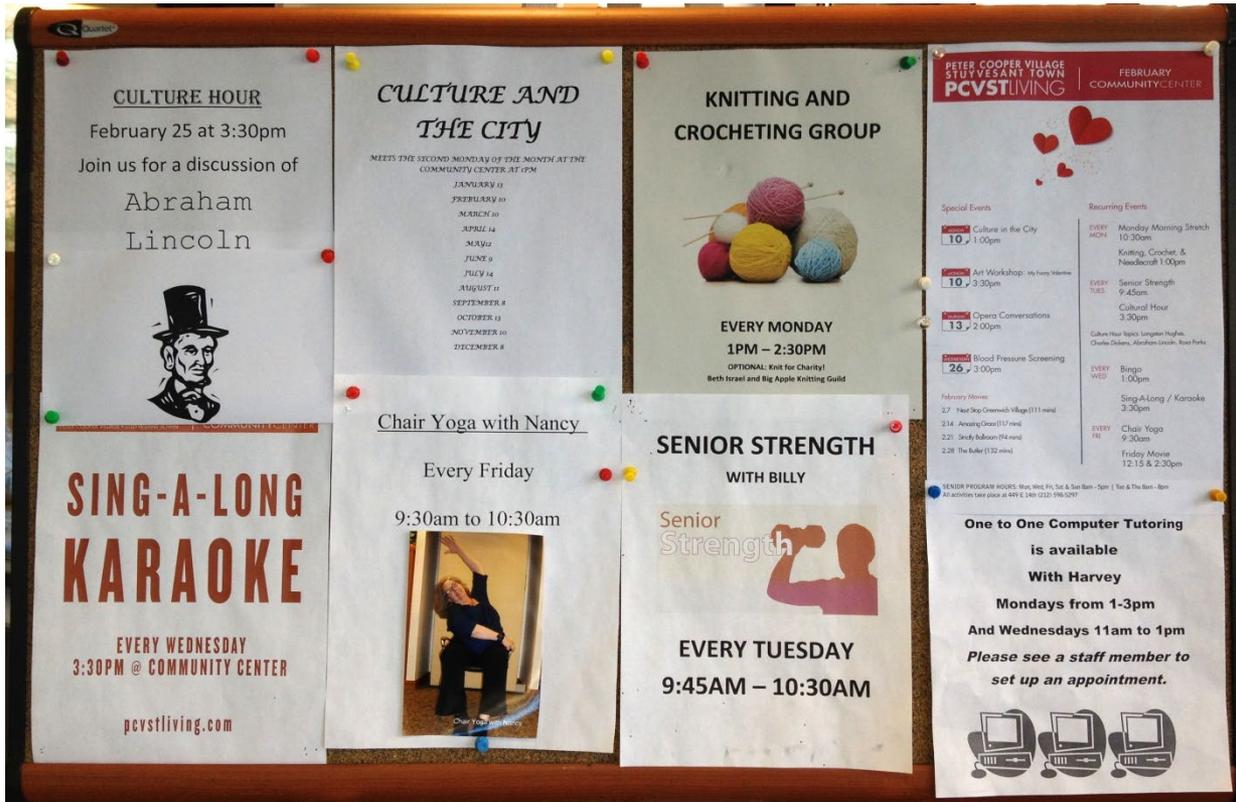
# 6. Civic Participation & Employment



Why does work need to be an all or nothing experience?

An age-friendly community provides ways older people can (if they choose) continue to work for pay, volunteer their skills and be actively engaged in community life.

# 7. Communication & Information



Information today is delivered in many ways and many still don't know how to use.

Age-friendly communities recognize that not everyone has a smartphone or Internet access and that information needs to be disseminated through a variety of means.

# 8. Community & Health Services



At some point, every person of every age gets hurt, becomes ill or simply needs some help. While it's important that care be available nearby, it's essential that residents are able to access and afford the services required.

**Questions?**

# Contact Us!

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